Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
you pict exa	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Louis First name Anthony	Stephanie First name  Florence
	Bring your picture identification to your meeting with the trustee.	Middle name  Mays  Last name and Suffix (Sr., Jr., II, III)	Mays  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Stephanie Florence Hopkins
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9006	xxx-xx-6512

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Case number (if known)

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		4225 Hopper Street Raleigh, NC 27616			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Wake			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

**Louis Anthony Mays** 

Stephanie Florence Mays

Debtor 1 Debtor 2 Case 19-04819-5-SWH Doc 1 Filed 10/17/19 Entered 10/17/19 17:19:09 Page 3 of 79

	otor 1 otor 2	Louis Anthony Ma Stephanie Florence					Case number (if known)	
Par	t 2:	Tell the Court About \	Your Bankı	ruptcy Ca	ase			
7. The chapter of the Bankruptcy Code you are		Check on (Form 201	e. (For a t 10)). Also,	orief description of go to the top of pa	each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankrup e box.	tcy	
	choc	sing to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo ord a pi	out how your er. If your re-printed	ou may pay. Typica attorney is submit address.	ally, if you are paying the fee you ting your payment on your beh	k with the clerk's office in your local court for more dourself, you may pay with cash, cashier's check, or nalf, your attorney may pay with a credit card or check	noney k with
						<b>Iments.</b> If you choose this option of the o	on, sign and attach the Application for Individuals to	Pay
			☐ I re	quest that is not req	at my fee be waive uired to, waive you	ed (You may request this optiour fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li	ne that
							n installments). If you choose this option, you must fi cial Form 103B) and file it with your petition.	ii out
9.		you filed for cruptcy within the	■ No.					
		B years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	not f you,	by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	□ No.	Go to I	ine 12.			
			Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	st you?	
					No. Go to line 12			
					Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with the	nis

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	otor 1 Louis Anthony Ma otor 2 Stephanie Florence			Case number (if known)
Par	t 3: Report About Any Bu	isinossos	You Own as a Sole Propriet	
	Are you a sole proprietor	1311163363	Tou Own as a sole i ropher	
	of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Stat	e & ZIP Code
	it to this petition.		Check the appropriate bo	x to describe your business:
			☐ Health Care Busing	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defended)	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

10/17/19 5:15PM

Debtor 1	Louis Anthony Mays
Debtor 2	Stephanie Florence Mays

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-04819-5-SWH Doc 1 Filed 10/17/19 Entered 10/17/19 17:19:09 Page 6 of 79

	tor 1 tor 2	Louis Anthony Ma Stephanie Florence			Ca	se number (if ki	nown)
Part	t 6:	Answer These Questi	ons for Rep	orting Purposes			
16.	What you h	kind of debts do nave?	ir C -	are your debts primarily consumed individual primarily for a personal, for the line 16b.  ■ Yes. Go to line 17.			in 11 U.S.C. § 101(8) as "incurred by an
			16b. <b>A</b>	Tes. Go to line 17.  Ire your debts primarily busines noney for a business or investmer  No. Go to line 16c.  Yes. Go to line 17.			
				State the type of debts you owe that	at are not consumer debts o	or business de	bts
17.		ou filing under ter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.		
	after prope admi are p be av	ou estimate that any exempt erty is excluded and nistrative expenses aid that funds will railable for bution to unsecured tors?	a res.	am filing under Chapter 7. Do you re paid that funds will be available No Yes			is excluded and administrative expenses
18.		many Creditors do estimate that you	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.		much do you late your assets to orth?			□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mill □ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m	lion Ilion	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.		much do you late your liabilities ?	<b>\$100,00</b>	,000   - \$100,000   - \$500,000   - \$1 million	□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mill □ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m	lion Ilion	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part	7:	Sign Below					
For	you		I have exan	nined this petition, and I declare u	nder penalty of perjury that	the informatio	n provided is true and correct.
				osen to file under Chapter 7, I am es Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.
				ey represents me and I did not pay I have obtained and read the notic			attorney to help me fill out this
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.			·			
			bankruptcy and 3571.	case can result in fines up to \$25	0,000, or imprisonment for	up to 20 years	operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,
				Anthony Mays thony Mays f Debtor 1	Stephar	hanie Floren nie Florence e of Debtor 2	
			Executed o	October 17, 2019 MM / DD / YYYY	Executed	Octobe MM / DD	

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	00.00 20 0 102			.,_00.00	10/17/19 5:15PM
Debtor 1 Debtor 2	Louis Anthony M Stephanie Floren	•	Ca	se number (if known)	
•	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this pe under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify that	States Code, and have	explained the relief av	áilable under each chapter
•	e not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.			
		/s/ William G. Berggren	Date	October 17, 201	9
		Signature of Attorney for Debtor		MM / DD / YYYY	
		William O. Bannan 40075			

10/	17/1	0 5	· 1 E	D١

Fill	in this information to identify your case:		
	otor 1 Louis Anthony Mays		
	First Name Middle Name Last Name		
1	otor 2 Stephanie Florence Mays Suse if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA		
	se number		ck if this is an
		ame	nded filing
	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		ing correct
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	41,170.60
	1c. Copy line 63, Total of all property on Schedule A/B	\$	41,170.60
Par	t 2: Summarize Your Liabilities		
		Your	liabilities
		Amou	nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	52,748.88
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	246,267.27
	Your total liabilities	\$	299,016.15
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,996.70
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,985.09
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

10/17/19 5:15PM

Debtor 1	Louis Anthony Mays
Debtor 2	Stephanie Florence Mays

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,172.41

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	186,787.35
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	186,787.35

						10/17/19 5:15PI
Fill in t	this info	rmation to identify your	case and this filing:			
Debtor	1	Louis Anthony M	avs			
20010.		First Name	Middle Name	Last Name		
Debtor		Stephanie Floren				
(Spouse,	if filing)	First Name	Middle Name	Last Name		
United	States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA		
Case n	umbor					П о
	Idifibei					☐ Check if this is an amended filing
Offic	ial F	orm 106A/B				
_		le A/B: Prop	erty			12/15
informat	ion. If mo	ore space is needed, attach estion.	a separate sheet to this for	d people are filing together, both m. On the top of any additional pa		
1. <b>Do yo</b>	ou own o	r have any legal or equitable	e interest in any residence, l	ouilding, land, or similar property	?	
■ No	o. Go to Pa	art 2.				
☐ Ye	s. Where	e is the property?				
		,				
	1					
Part 2:	Describ	e Your Vehicles				
Do you	own, le	ase, or have legal or equ	itable interest in any vel	nicles, whether they are regis	tered or not? Include any v	ehicles you own that
someon	e else d	rives. If you lease a vehicl	e, also report it on Schedu	ıle G: Executory Contracts and	Unexpired Leases.	
3. Cars	s, vans, t	trucks, tractors, sport ut	ility vehicles, motorcycle	es		
п						
□ No						
■ Ye	es					
		Nices			Do not deduct secured of	laims or exemptions. Put
	Make:	Nissan		est in the property? Check one	the amount of any secur	ed claims on Schedule D:
	Model:	Altima 2017	Debtor 1 only		Creditors Who Have Cla	ims Secured by Property.
	Year:		Debtor 2 only <b>000</b> □ Debtor 1 and D		Current value of the entire property?	Current value of the portion you own?
	Other info			the debtors and another	entire property:	portion you own:
_		4D SR 2.5L I4	At least one of	the debiors and another		
			Check if this i	s community property	\$10,625.00	\$10,625.00
3.2	Make:	Infiniti	Who has an inter	est in the property? Check one		laims or exemptions. Put
	Model:	Q50	Debtor 1 only	PP OHOOK OHE		ed claims on Schedule D: ims Secured by Property.
	Year:	2016	■ Debtor 2 only			
			<b>000</b> □ Debtor 1 and D	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info			the debtors and another	brokers) .	, ,
5	Sedan 4	4D 2.0T Premium AWI				
	2.0L 14		_	s community property	\$22,425.00	\$22,425.00

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

## 10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

☐ Yes. Describe.....

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

\$2.00 Cash

Secured **Capital One** Card \$200.00

\$200.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Yes.....

Institution name:

Florida Credit Union 17.1. Savings

Checking

**Marine Federal Credit Union** 

\$46.35

\$5.00

Debtor 1 Debtor 2	Stephanie Florence		Case number (if known)			
	17.3.	Savings	Marine Federal Credit Union	\$5.00		
	17.4.	Money Market	Marine Federal Credit Union	\$0.00		
	17.5.	Checking	Bank of America	\$0.00		
	17.6.	Savings	Bank of America	\$0.00		
	17.7.	Checking	Navy Federal Credit Union	\$0.00		
	17.8.	Savings	Navy Federal Federal Credit Union	\$0.00		
	17.9.	Checking	Wells Fargo	\$6.25		
	17.10	Savings	Wells Fargo	\$6.00		
19. <b>Non-p</b> i <b>joint v</b> □ No	venture  Give specific information	about them	orated and unincorporated businesses, including an inte	rest in an LLC, partnership, and		
			n-profit) d/b/a Top Flight Elite	\$0.00		
Negot Non-n ■ No □ Yes. 21. <b>Retire</b> Exam □ No	nment and corporate bore iable instruments include pregotiable instruments are  Give specific information a  Issument or pension account oles: Interests in IRA, ERIS  List each account separat	nds and other nego personal checks, cas those you cannot tra about them uer name: ts SA, Keogh, 401(k), 4	chiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. Insfer to someone by signing or delivering them.	ing plans		
		of account:	Institution name: \$4,271.60 (Not Property of the Estate)	\$0.00		
	401(F		\$3,695.84 (Not Property of the Estate)	\$0.00		

		ouis Anthony Mays Stephanie Florence Mays	Case number (if known)	
_	Your shar		e so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications compar	nies, or others
ı	Yes		Institution name or individual:	
		Rental deposit	Rental House \$1,250.00	\$0.00
		Utility	Duke Energy \$500.00	\$0.00
_	Annuities ■ No	(A contract for a periodic payment of mo	oney to you, either for life or for a number of years)	
	⊒ Yes	Issuer name and description		
2	26 U.S.C. §	n an education IRA, in an account in a §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition pro	ogram.
	■ No □ Yes	Institution name and descript	tion. Separately file the records of any interests.11 U.S.C. § 521(c)	:
ı	No		(other than anything listed in line 1), and rights or powers exc	ercisable for your benefit
[	☐ Yes. Gi	ve specific information about them		
		opyrights, trademarks, trade secrets, :: Internet domain names, websites, prod	and other intellectual property ceeds from royalties and licensing agreements	
I	Yes. Gi	ve specific information about them		
		tfe.org		\$0.00
[	Examples ☐ No	franchises, and other general intanging building permits, exclusive licenses, cover specific information about them	ibles poperative association holdings, liquor licenses, professional licens	ees
		Notary License	e	\$0.00
Мо	ney or pro	perty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refun	ds owed to you		
_	■ No □ Yes. Giv	re specific information about them, include	ding whether you already filed the returns and the tax years	
_	Family su Examples ■ No	•	al support, child support, maintenance, divorce settlement, property	r settlement
_		re specific information		
_	Examples	bunts someone owes you : Unpaid wages, disability insurance pay benefits; unpaid loans you made to so	yments, disability benefits, sick pay, vacation pay, workers' compe meone else	nsation, Social Security
	■ No □ Yes. Gi	ve specific information		

Debtor 1 Debtor 2	Louis Anthony Stephanie Flo		Case number (if known)	
	ests in insurance po apples: Health, disabil	<b>plicies</b> ity, or life insurance; health savings account (HSA); or	credit, homeowner's, or renter's insural	nce
	. Name the insuranc	ee company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Term Life Insurance Policy \$51,000	Wife and kids	\$0.00
		Term Life Insurance Policy \$100,000	Husband and kids	\$0.00
		Health Insurance		\$0.00
		Vision		\$0.00
		Dental		\$0.00
		USAA Automobile Insurance		\$0.00
Exam No Yes  34. Other No Yes  35. Any fi	nples: Accidents, em  Describe each cla  contingent and un  Describe each cla	liquidated claims of every nature, including coun		o set off claims
36. <b>Add</b>	the dollar value of	all of your entries from Part 4, including any entr		\$270.60
Part 5: D	escribe Any Business	s-Related Property You Own or Have an Interest In. List a	any real estate in Part 1.	
■ No. G	own or have any legates to Part 6. Go to line 38.	al or equitable interest in any business-related property?	?	
		d Commercial Fishing-Related Property You Own or Have erest in farmland, list it in Part 1.	ve an Interest In.	
■ No	ou own or have any o. Go to Part 7. es. Go to line 47.	legal or equitable interest in any farm- or comme	rcial fishing-related property?	

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Debt Debt			Case number (if known)	10/17/19 5.15PW
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	To you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No  Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$33,050.00		
57.	Part 3: Total personal and household items, line 15	\$7,850.00		
58.	Part 4: Total financial assets, line 36	\$270.60		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$41,170.60	Copy personal property total	\$41,170.60
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$41 170 60

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA RALEIGH DIVISION

In re:	Case No.
LOUIS ANTHONY MAYS STEPHANIE FLORENCE MAYS	Chapter 7
Debtor(s).	

## SCHEDULE C-2 PROPERTY CLAIMED AS EXEMPT

I/We, Louis Anthony Mays and Stephanie Florence Mays, claim the following property as exempt pursuant to 11 U.S.C. Sec. 522 and Federal bankruptcy law or the laws of a State other than North Carolina, and non-bankruptcy Federal Law (*Attach additional sheets if necessary*):

Description of Property	Specify Law Providing	Value of Claimed	Current Market Value of
	Each Exemption	Exemption	<b>Property Without</b>
			<b>Deducting Exemption</b>

See Attached Schedule C which is incorporated by this reference.

3. 11 U.S.C. Sections 522(d)(3),(d)(4), and (d)(5) (or other applicable state law – below is a breakdown of personal household, personal, or jewelry – Schedule C totals and statutory references are incorporated by this reference) ,PERSONAL OR HOUSEHOLD GOODS, JEWELRY (and Wildcard if Applicable)

Description of Property	Market Value	Lien Holder	Amt. Lien	Net Value	Claimed as Exempt
Clothing & personal	1500				1500
Kitchen appliances	300				300
Stove					
Refrigerator					
Freezer	100				100
Washing Machine	300	Progressiv e Finance	350		0

Dryer	300	Progressiv e Finance	350		0
China					
Silver					
Jewelry (11 U.S.C. Sec. 522(d)(4)	250				250
Living Room Furniture	350				350
Den Furniture	100				100
Bedroom Furniture	2000	Ashley Furniture	500	700	700
Dining Room Furniture	150				150
Lawn Furniture					
Television(s)	300				300
() Stereo () Radio	100				100
( ) VCR/DVD ( ) Video Camera					
Other Audio Equipment	150				150
Computer & Accessories	2500				2500
Musical Instruments	25				25
() Piano () Organ					
Air Conditioner					
Paintings/Art	25				25
Books	25				25
Other Collections (CD's, Tapes, Etc.)					
Lawn Mower	100				100
Yard Tools	50				50
Power Tools	50				50
Other Tools	25				25
Crops					

Recreational Equipment					
Firearms (used for household protection)					
Other Household Goods, Supplies & Furnishings	250				250
Other Personal Items & Possessions					
Other Miscellaneous Items, Specify:					
	VAL	UE CLAIMED A	AS EXEMPT:	1	7,050.00

I/We declare that the following are the dates and addresses of my domicile during the 730 days preceding the date of the filing of the bankruptcy petition:

	Prior Addresses/ Dates	
See Response To Question 2	of Statement of Financial Affairs	

I declare that to the extent that any exemption I have claimed appears on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

# UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-2 - PROPERTY CLAIMED AS EXEMPT

,	and Stephanie Florence Mays, declare under penalty of perjury that operty Claimed as Exempt, consisting of sheets, and that the edge, information and belief.	
Executed on	/s/Louis Anthony Mays Debtor	
	/s/Stephanie Florence Mays Joint Debtor	

10/17/19	

Fill in this inform	nation to identify your	case:		
Debtor 1	Louis Anthony M	ays		
	First Name	Middle Name	Last Name	
Debtor 2	Stephanie Floren	ce Mays		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	PF NORTH CAROLINA	
Case number				
(if known)				Check if this is an amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2017 Nissan Altima 70,000 miles Sedan 4D SR 2.5L I4	\$10,625.00		\$4,000.00	11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2016 Infiniti Q50 40,000 miles Sedan 4D 2.0T Premium AWD 2.0L I4	\$22,425.00		\$4,000.00	11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	See C-2 Line from Schedule A/B: 6.1	\$2,175.00		\$2,175.00	11 U.S.C. § 522(d)(3)
	Line from Scriedule A/B: 0.1			100% of fair market value, up to any applicable statutory limit	
	See C-2 Line from Schedule A/B: 7.1	\$3,075.00		\$3,075.00	11 U.S.C. § 522(d)(3)
	Line IIoni Scriedule AVB. 7.1			100% of fair market value, up to any applicable statutory limit	
	See C-2 Line from Schedule A/B: 8.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)
	Line nom Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	

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	botor 1 Louis Anthony Mays Stephanie Florence Mays			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	See C-2 Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	See C-2 Line from Schedule A/B: 12.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(4)
	2.110 110.111 007.000.007.72.			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$2.00		\$2.00	11 U.S.C. § 522(d)(5)
	Line its in conequie /v2.			100% of fair market value, up to any applicable statutory limit	
	Secured Capital One Card \$200.00 Line from Schedule A/B: 16.2	\$200.00		\$46.16	11 U.S.C. § 522(d)(5)
	Line IIoiii Schedule A.B. 10.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Florida Credit Union Line from Schedule A/B: 17.1	\$5.00	•	\$5.00	11 U.S.C. § 522(d)(5)
	Line IIoiii Schedule A.D. TTT			100% of fair market value, up to any applicable statutory limit	
	Checking: Marine Federal Credit Union	\$46.35		\$46.35	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Marine Federal Credit Union Line from Schedule A/B: 17.3	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Genedate A/D. 1110			100% of fair market value, up to any applicable statutory limit	
	Checking: Wells Fargo Line from Schedule A/B: 17.9	\$6.25		\$6.25	11 U.S.C. § 522(d)(5)
	Line IIoiii Schedule A.B. 17.3			100% of fair market value, up to any applicable statutory limit	
	Savings: Wells Fargo Line from Schedule A/B: 17.10	\$6.00		\$6.00	11 U.S.C. § 522(d)(5)
	Line IIom Schedule A.B. 11.10			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			ed on or after the date of adjustmen	t.)
	Yes. Did you acquire the property covered	d by the exemption wi	thin 1	215 days before you filed this case?	)
	□ No	,			
	☐ Yes				

Case 1	.9-04019-3-3441	1 DOC 1 Filed 10/11/19 Effect	50 10/1//19 1	7.19.09 Page 	10/17/19 5:15P
Fill in this infor	mation to identify you	r case:			
Debtor 1	Louis Anthony	Mays			
	First Name	Middle Name Last Name		-	
Debtor 2	Stephanie Flore	nce Mays			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA	1	-	
Case number (if known)				☐ Check	if this is an
				ameno	led filing
Official For	m 106D				
		Who Have Claims Secured	by Propert	У	12/15
☐ No. Chec	s have claims secured by the this box and submit the in all of the information land.	nis form to the court with your other schedules. You	u have nothing else t	to report on this form.	
2. List all secured	d claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If I	more than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Acceptai	nce Now	Describe the property that secures the claim:	\$500.00	\$200.00	\$300.00
Creditor's Nar		Mattress (Purchased 3/2019)	******		,
Attn: Off	icer				
	oital Blvd.	As of the date you file, the claim is: Check all that apply.			
	NC 27616	Contingent			
Number, Stree	et, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the d	lebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	22	■ An agreement you made (such as mortgage or secu	urod		
Debtor 2 only		car loan)	ii Gu		
☐ Debtor 1 and □	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	the debtors and another	☐ Judgment lien from a lawsuit			

☐ Check if this claim relates to a

community debt Date debt was incurred ☐ Other (including a right to offset)

Last 4 digits of account number

0042

East Name   East	Debtor 1 Louis Anthony Mays		Case number (if known)		
First Name   Model Acceptance   Describe the property that secures the claim: \$25,364.91 \$22,425.00 \$2,939.91	First Name Middle N	ame Last Name			
Acceptance Describe the property that secures the claim:  Attn: Officer 991 E. Main Street Spartanburg, SC 29302 Twarter, Smart, City, Smart Apr Coordingtont Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 2 only Attraction 2 only Debtor 4 only Debtor 2 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor					
Actin: Officer 991 E. Main Street Spartanburg, SC 239322 Number, Street, City, Steen & 270 Dec. Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Salt Lake City, UT Salt 30-0285 Salt Lake City, UT Salt 30-0285 Subtraction 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Debtor 3 only Debtor 2 only Attract of lies. Check all that apply.  Attraction of lies. Check all that sophy.  Att	That Name Wilde N	Lastivanie			
Condition's Name   Condition's		Describe the annual state of account the plains	\$25 36 <i>4</i> 91	\$22 425 00	\$2 939 91
Section 4D 2.0T Premium AWD 2.0L  Attn: Officer 961 E. Main Street Spartanburg, SC 29302 Narrier, Sieve City, Sales & 2p Code   Debot 1 conty   Debot 2 conty   Debot 2 conty   Debot 3 community debt			Ψ23,304.31	ΨΣΣ,ΨΣΟ.ΟΟ	Ψ2,555.51
Attr: Officer \$G 1E, Main Street \$Spartanburg, SC 29302 Number, Seec, Circ, State & 250 Code   Contingent   Uniquidated   Debtor 1 on Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 and Debtor 2 only   Debtor 1 and Debtor 2 only	Creditor's Name				
Set IE. Main Street Spartamburg. SC 23302 Number, Server, No., Status 4 27 code   Debtor 1 only					
Spartanburg, Sc 23302   Namber, Street, City, State & Zip Cose   Date of Land   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 o					
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check it it his claim relates to a community debt  Date debtor 2 only Debtor 3 one System Coy, State & Zp Coto Who owes the debt? Check one. Describe the property that secures the claim: Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 one Check it it has been a control of the debtors and another control of					
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only No wes the debt? Check # this claim relates to a community debt  Debtor 2 only No wes the debt? Check # this claim relates to a community debt  Debtor 2 only Debtor 1	Spartanburg, SC 29302	☐ Contingent			
Debtor 1 only	Number, Street, City, State & Zip Code	☐ Unliquidated			
Date of 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Date debt was incurred 7/2019 Last 4 digits of account number 5230  2.3 Capital One Conditions Name Attr: Officer PO Box 30285 Salt Lake City, UT 84130-0285 Number, Sireet, City, Siste & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only D	Who are the debt0 of	•			
Debtor 2 only Debtor 1 and Debtor 2 only Date of the debtors and another Community debt  Date debt was incurred 7/2019  Last 4 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  East 2 digits of account number 5230  Unliquidated Disputed Al least one of the debtors and another 6240 and 6240 an	_	_			
Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 3 and 3	_ ′	, ,	secured		
At least one of the debtors and another Check if this claim relates to a community debt   Date debt was incurred   7/2019   Last 4 digits of account number   5230	, and the second				
Community debt  Date debt was incurred 7/2019  Last 4 digits of account number 5230  Describe the property that secures the claim: \$153.84 \$200.00 \$0.00  Secured Capital One Conditions Name Attn: Officer PO Box 30285 Salt Lake City, UT 84130-0285 Number, Street, City, State & Zp Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Date debt was incurred 1 Check in this claim relates to a community debt  Date debt was incurred 1 Check in this claim relates to a Check in the property that secures the claim is: Check all that apply.  Last 4 digits of account number 1 1002  Last 4 digits of account number 1 1002  2.4 Conn's Applicance Creditor's Name  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zp Code Who owes the debt? Check one.    Debtor 1 and Debtor 2 only   Contingent   Check all that apply.   As of the date you file, the claim is: Check all that spoy.   Statutory lien (such as tax lien, mechanic's lien)   Check in the claim is: Check all that spoy.   As of the date you file, the claim is: Check all that spoy.   As of the date you file, the claim is: Check all that spoy.   Check if this claim relates to a community debt   Check if this claim relates to a control of the debtors and another   Check in this claim relates to a control of the debtors and another   Check in this claim relates to a control of the debtors and another   Check in this claim relates to a control of the debtors and another   Check in this claim relates to a community debt   Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Statutory lien (such as tax lien, mechanic's lien)   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only					
Date debt was incurred 7/2019  Last 4 digits of account number 5230  2.3 Capital One Creditor's Name Attri: Officer PO Box 30285 Saft Lake City, UT 84130-0285 Number, Street, Cay, Starte 8. Zep Code Debtor 2 only Debtor 3 and Debtor 3 only Date debt was incurred  Last 4 digits of account number 1002  2.4 Conn's Applicance Creditor's Name Attri: Officer PO Box 815867 Dallas, TX 75234 Number, Street, Cay, Starte 8. Zep Code  Who owes the debt? Check one.  As of the date you file, the claim is: Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Understand the claim relates to a community debt  As of the date you file, the claim: Statutory lien (such as tax lien, mechanic's lien) Understand the claim relates to a community debt  Attri: Officer PO Box 815867 Dallas, TX 75234 Number, Street, Cay, Starte 8. Zep Code  Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 2 only Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 2 only Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 1 only Debtor 2 only Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 2 only Debtor 1 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 2 only Debtor 3 only Statutory lien (such as tax lien, mechanic's lien) Underwell lien from a lawsuit Debtor 2 only Debtor 2 only Debtor 3 only Sta	_	=			
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check iff it sclaim relates to a community debt    Consister Abane   Check iff only   Contingent		Other (including a right to offset)	Money Security		
Attn: Officer PO Box 30285 Salt Lake City, UT 84130-0285 Number, Street, City, State & Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number Date debt was incurred  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As a fit he date you file, the claim is: Check all that apply.  As a fit he date you file, the claim is: Check all that apply.  As a fit he date you made (such as mortgage or secured car loan)  Date of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number Date debt was incurred  Last 4 digits of account number Describe the property that secures the claim:  Surface Pro Laptop  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as tax lien, mechanic's lien) Undepment lien from a lawsuit Un	Date debt was incurred 7/2019	Last 4 digits of account number 5230	)		
Attn: Officer PO Box 30285 Salt Lake City, UT 84130-0285 Number, Street, City, State & Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number Date debt was incurred  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As a fit he date you file, the claim is: Check all that apply.  As a fit he date you file, the claim is: Check all that apply.  As a fit he date you made (such as mortgage or secured car loan)  Date of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number Date debt was incurred  Last 4 digits of account number Describe the property that secures the claim:  Surface Pro Laptop  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Statutory lien (such as tax lien, mechanic's lien) Undepment lien from a lawsuit Un					
Attn: Officer PO Box 30285 Salt Lake City, UT 84130-0285  Number, Street, City, State & Zip Code Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Detect is this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number  Date debt was incurred  As of the date you file, the claim is: Check all that apply.  Date of the debtor and another control is the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Date of the debtor only  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another control is the claim is: Check all that apply.  Statutory lien (such as tax lien, mechanic's lien)  Disputed  Nature of lien. Check if this claim relates to a community debt  Other (including a right to offset)  Other (including a right to offset)			\$153.84	\$200.00	\$0.00
PO Box 30285 Salt Lake City, UT 84130-0285   Number. Street, City, State & Zip Code   Uniliquidated   Disputed   Mature of lien. Check all that apply.	Creditor's Name	Secured Capital One Card \$200.00			
Salt Lake City, UT 84130-0285   Contingent   Unliquidated   Disputed	Attn: Officer				
Salt Lake City, D1 84130-0285   Number, Street, City, State & Zip Code   Disputed		As of the date you file the claim is: Check all that			
Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim:  Attn: Officer PD Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 2 only  An agreement you made (such as mortgage or secured car loan)  Surface Pro Laptop  As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Detect of this claim relates to a community debt  Other (including a right to offset) Dother (including a right to offset) Dother (including a right to offset) Dother (including a right to offset) Detect is and Debtor 2 only Detect of the debtors and another Dother (including a right to offset)					
Who owes the debt? Check one.    Disputed   Nature of lien. Check all that apply.	84130-0285	☐ Contingent			
Who owes the debt? Check one.         Nature of lien. Check all that apply.           □ Debtor 1 only         □ An agreement you made (such as mortgage or secured car loan)           □ Debtor 1 and Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)           □ At least one of the debtors and another community debt         □ Other (including a right to offset)           □ Debtor 1 only         □ Describe the property that secures the claim:         \$1,070.38         \$0.00         \$1,070.38           ■ Creditor's Name         Surface Pro Laptop         As of the date you file, the claim is: Check all that apply.         □ Contingent         □ Unliquidated         □ Debtor 1 only         □ As of the date you file, the claim is: Check all that apply.         □ Contingent         □ Unliquidated         □ Disputed         Nature of lien. Check all that apply.         □ An agreement you made (such as mortgage or secured car loan)         □ Debtor 1 only         □ An agreement you made (such as tax lien, mechanic's lien)         □ Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)         □ Unliquidated         □ Unliquidated         □ Unliquidated         □ Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)         □ Check if this claim relates to a community debt         □ Other (including a right to offset)	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.         Nature of lien. Check all that apply.           □ Debtor 1 only         □ An agreement you made (such as mortgage or secured car loan)           □ Debtor 1 and Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)           □ At least one of the debtors and another community debt         □ Other (including a right to offset)           □ Debtor 1 only         □ Describe the property that secures the claim:         \$1,070.38         \$0.00         \$1,070.38           ■ Creditor's Name         Surface Pro Laptop         As of the date you file, the claim is: Check all that apply.         □ Contingent         □ Unliquidated         □ Debtor 1 only         □ As of the date you file, the claim is: Check all that apply.         □ Contingent         □ Unliquidated         □ Disputed         Nature of lien. Check all that apply.         □ An agreement you made (such as mortgage or secured car loan)         □ Debtor 1 only         □ An agreement you made (such as tax lien, mechanic's lien)         □ Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)         □ Unliquidated         □ Unliquidated         □ Unliquidated         □ Debtor 2 only         □ Statutory lien (such as tax lien, mechanic's lien)         □ Check if this claim relates to a community debt         □ Other (including a right to offset)		Disputed			
Debtor 2 only	Who owes the debt? Check one.				
Debtor 1 and Debtor 2 only  At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number Creditor's Name  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Check if this claim relates to a community debt  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit Other (including a right to offset)  Describe the property that secures the claim: \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38	■ Debtor 1 only	☐ An agreement you made (such as mortgage or s	secured		
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Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number 1002  2.4 Conn's Applicance  Creditor's Name  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Other (including a right to offset)  1002  Last 4 digits of account number 1002  Start 4 digits of account number 1002  \$\text{\$1,070.38}\$ \$0.00 \$\text{\$1,070.38}\$  \$0.00 \$\text{\$1,070.38}\$  \$\text{\$0.00}\$ \$\text{\$1,070.38}\$  \$\text{\$0.00}\$ \$\text{\$\$1,070.38}\$  \$\text{\$\$0.00}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$1,070.38}\$  \$\text{\$\$\$\$}\$ \$\text{\$\$0.00}\$ \$\text{\$\$\$\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$\$}\$ \$\text{\$\$}\$ \$\tex	′	_			
Creditor's Name  Creditor's Name  Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Dascribe the property that secures the claim: \$1,070.38 \$0.00 \$11,070.38 \$0.00 \$11,070.38 \$0.00 \$11,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38 \$0.00 \$1,070.38	_	•			
2.4 Conn's Applicance  Creditor's Name  Attn: Officer PO Box 815867 Dallas, TX 75234  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Describe the property that secures the claim: \$1,070.38  \$0.00 \$1,070.38  \$0.00 \$1,070.38  \$0.00 \$1,070.38					
Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) An agreement you made (such as tax lien, mechanic's lien) An agreement lien from a lawsuit Check if this claim relates to a community debt  Surface Pro Laptop  As of the date you file, the claim is: Check all that apply.  Unliquidated Unliquidated Unliquidated An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Unliquidated	Date debt was incurred	Last 4 digits of account number 1002	2		
Attn: Officer PO Box 815867 Dallas, TX 75234 Number, Street, City, State & Zip Code  Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) An agreement you made (such as tax lien, mechanic's lien) An agreement lien from a lawsuit Check if this claim relates to a community debt  Surface Pro Laptop  As of the date you file, the claim is: Check all that apply.  Unliquidated Unliquidated Unliquidated An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Unliquidated	2.4 Conn's Applicance	Describe the property that secures the claim:	\$1 N7N 2Q	የበ በበ	\$1 070 29
Attn: Officer PO Box 815867 Dallas, TX 75234  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset)			Ψ1,070.30	Ψ0.00	Ψ1,070.30
As of the date you file, the claim is: Check all that apply.    Number, Street, City, State & Zip Code   Unliquidated     Disputed     Debtor 1 only     Debtor 2 only     Debtor 1 and Debtor 2 only     At least one of the debtors and another     Check if this claim relates to a community debt     Check if this claim relates to a community debt     As of the date you file, the claim is: Check all that apply.     Contingent     Unliquidated     Disputed     Nature of lien. Check all that apply.     An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)	oroano. o manie	Surface Pro Laptop			
As of the date you file, the claim is: Check all that apply.    Number, Street, City, State & Zip Code   Unliquidated   Disputed	Attn: Officer				
Dallas, TX 75234   Contingent   Contingent   Unliquidated     Disputed     Debtor 1 only   At least one of the debtors and another     Check if this claim relates to a community debt     Dallas, TX 75234   Contingent     Contingent   Unliquidated     Disputed     Nature of lien. Check all that apply.   An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)     Other (including a right to offset)     Contingent     Unliquidated     Disputed     Nature of lien. Check all that apply.   An agreement you made (such as mortgage or secured car loan)     Other (including a right to offset)					
Number, Street, City, State & Zip Code  Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)		_			
Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Other (including a right to offset)					
Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Other (including a right to offset)	Number, Street, City, State & Zip Code	<u> </u>			
□ Debtor 2 only	Who owes the debt? Check one.				
□ Debtor 2 only	Debtor 1 only	_	secured		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Check if this claim relates to a	_	• • • • • • • • • • • • • • • • • • • •	occureu		
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)	•	<u> </u>			
☐ Check if this claim relates to a community debt  ☐ Other (including a right to offset)	_				
community debt		•			
Date debt was incurred Last 4 digits of account number		☐ Other (including a right to offset)			
	Date debt was incurred	Last 4 digits of account number 3630	)		

Debtor 1 Louis Anthony Ma	ys	Case number (if known)		
	Middle Name Last Name	_		
Debtor 2 Stephanie Florence	e Mays Middle Name Last Name			
i list Name ii	Middle Name			
2.5 NPRTO South-East LL	C Describe the property that secures the claim:	\$700.00	\$600.00	\$100.00
Creditor's Name	Washer and Dryer			
Attn: Officer	As of the date you file, the claim is: Check all that	 at		
256 West Data Drive	apply.	-		
Draper, UT 84020	Contingent			
Number, Street, City, State & Zip Co	1			
Who owes the debt? Check one.	☐ Disputed <b>Nature of lien.</b> Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage of	or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the debtors and an	nother			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 12/18	Last 4 digits of account number 59	96		
Regional Acceptance				
Corporation	Describe the property that secures the claim:	\$24,959.75	\$10,625.00	\$14,334.75
Creditor's Name	2017 Nissan Altima 70,000 miles			
	Sedan 4D SR 2.5L I4			
Attn: Officer	As of the date you file, the claim is: Check all that	l at		
PO Box 830913 Birmingham, AL 35283	apply.			
	Contingent			
Number, Street, City, State & Zip Co				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	_	d		
Debtor 2 only	<ul> <li>An agreement you made (such as mortgage of car loan)</li> </ul>	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and an		11)		
☐ Check if this claim relates to a		se Money Security		
community debt	— Other (including a right to onset)			
Date debt was incurred 0/2017	Last 4 digits of account number 07	20		
Date debt was incurred 9/2017	Last 4 digits of account number 97	<u> </u>		
Add the dollar value of your entri	ies in Column A on this page. Write that number here:	\$52,748.88	1	
	m, add the dollar value totals from all pages.		1	
Write that number here:		\$52,748.88	]	
Part 2: List Others to Be Notif	fied for a Debt That You Already Listed			
	•	very already listed in Dort 4. For a	vommin if a callecti	
trying to collect from you for a deb	ers to be notified about your bankruptcy for a debt that it you owe to someone else, list the creditor in Part 1, a bits that you listed in Part 1, list the additional creditors ibmit this page.	nd then list the collection agency	here. Similarly, if yo	ou have more
Name, Number, Street, City, S	State & Zip Code Or	which line in Part 1 did you enter the	e creditor? 2.3	
Capital One Attn: Officer		-4 4 distant -4 1		
4851 Cox Road	La	st 4 digits of account number		
Glen Allen, VA 23060				

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Debtor 1	Louis Anthony M	ays		Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Stephanie Floren	ce Mays			
	First Name	Middle Name	Last Name		
Pr At 25	me, Number, Street, City, ogressive Leasing tn: Officer 6 West Data Drive aper, UT 84020			On which line in Part 1 did you enter  Last 4 digits of account number	the creditor? 2.5

Ouse 1	3 04013 3 3WII BOC	1 Thea 10/17/13 Entered	10/11/13 11.	_	1 age 27 of	0/17/19 5:15PM
Fill in this infor	mation to identify your case:					
Debtor 1	Louis Anthony Mays					
		dle Name Last Name				
Debtor 2	Stephanie Florence Mays					
(Spouse if, filing)	First Name Mid	dle Name Last Name				
United States Ba	ankruptcy Court for the: EASTE	RN DISTRICT OF NORTH CAROLINA				
Case number						
(if known)					Check if this is amended filing	an
Official Forr	m 106E/F					
	E/F: Creditors Who Ha	ve Unsecured Claims			12 <i>/</i>	15
Schedule G: Exect Schedule D: Credi	utory Contracts and Unexpired Lease tors Who Have Claims Secured by Pr ntinuation Page to this page. If you h	result in a claim. Also list executory contracts (Official Form 106G). Do not include any creoperty. If more space is needed, copy the Parave no information to report in a Part, do not	editors with partially t you need, fill it out	secured clai , number the	ms that are listed entries in the box	in ces on the
Part 1: List A	All of Your PRIORITY Unsecured	Claims				
1. Do any credit	ors have priority unsecured claims a	gainst you?				
☐ No. Go to I	Part 2.					
Yes.						
identify what ty possible, list the	ype of claim it is. If a claim has both prio	tor has more than one priority unsecured claim, li rity and nonpriority amounts, list that claim here a g to the creditor's name. If you have more than tw m, list the other creditors in Part 3.	and show both priority	and nonpriori	ty amounts. As mu	ch as
(For an explar	nation of each type of claim, see the inst	ructions for this form in the instruction booklet.)		<b>-</b>		
			Total claim	Priority amount	Nonprio amount	
2.1 Interna	Il Revenue Service	Last 4 digits of account number	\$0.00		\$0.00	\$0.00
•	reditor's Name lized Insolvency	When was the debt incurred?				
Operat		Then was the dest meaned.		_		
PO Box						
Philade	elphia, PA 19101-7346	As a full solution of the distriction of the	. 11 41 - 4 1			
	Street City State Zip Code ed the debt? Check one.	As of the date you file, the claim is: Check	all that apply			
Debtor 1		☐ Contingent				
	•	Unliquidated				
Debtor 2		☐ Disputed				
■ Debtor 1	and Debtor 2 only	Type of PRIORITY unsecured claim:				
☐ At least o	one of the debtors and another	☐ Domestic support obligations				
☐ Check if	this claim is for a community debt	■ Taxes and certain other debts you owe the				
Is the claim	subject to offset?	☐ Claims for death or personal injury while yo	ou were intoxicated			
■ No		Other. Specify				
☐ Yes		Notice Purposes C	nly		•	

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Debtor 1 Louis Anthony Mays Debtor 2 Stephanie Florence Mays	Case number (if known)		
N.C. Dept of Revenue	Last 4 digits of account number \$0.00	\$0.00	\$0.00
Priority Creditor's Name Office Service Div. Bankruptcy Unit	When was the debt incurred?		
PO Box 1168			
Raleigh, NC 27602-1168  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	<u> </u>		
_	☐ Disputed  Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			
At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
No	Other. Specify		
☐ Yes	Notice Purposes Only		
Part 2: List All of Your NONPRIORITY Unsecus.  Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.	ns against you?		
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other	ns against you?	included in Part	1. If more
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already	included in Part	1. If more Page of
<ul> <li>Do any creditors have nonpriority unsecured claim         □ No. You have nothing to report in this part. Submit     </li> <li>■ Yes.</li> <li>List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.</li> </ul>	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim     No. You have nothing to report in this part. Submit     Yes.     List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.      AFNI, Inc.     Nonpriority Creditor's Name	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the last 4 digits of account number	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more that the creditor who holds each claim it is. Do not list claims already it is creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the last 4 digits of account number	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the last 4 digits of account number	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim     No. You have nothing to report in this part. Submit     Yes.     List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.      AFNI, Inc.     Nonpriority Creditor's Name     Attn: Officer     PO Box 3427     Bloomington, IL 61702	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim     No. You have nothing to report in this part. Submit     Yes.      List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.      AFNI, Inc.     Nonpriority Creditor's Name     Attn: Officer     PO Box 3427     Bloomington, IL 61702     Number Street City State Zip Code	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?	included in Part he Continuation	1. If more Page of
. Do any creditors have nonpriority unsecured claim  □ No. You have nothing to report in this part. Submit  ■ Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.  AFNI, Inc.  Nonpriority Creditor's Name  Attn: Officer  PO Box 3427  Bloomington, IL 61702  Number Street City State Zip Code  Who incurred the debt? Check one.  ■ Debtor 1 only	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already it creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  AFNI, Inc.  Nonpriority Creditor's Name  Attn: Officer  PO Box 3427  Bloomington, IL 61702  Number Street City State Zip Code  Who incurred the debt? Check one.  □ Debtor 1 only  □ Debtor 2 only	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated	included in Part he Continuation	1. If more Page of
. Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.  AFNI, Inc.  Nonpriority Creditor's Name Attn: Officer PO Box 3427 Bloomington, IL 61702  Number Street City State Zip Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already it creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.  AFNI, Inc.  Nonpriority Creditor's Name  Attn: Officer  PO Box 3427  Bloomington, IL 61702  Number Street City State Zip Code  Who incurred the debt? Check one.  □ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed	included in Part he Continuation	1. If more Page of
Do any creditors have nonpriority unsecured claim  No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.  AFNI, Inc.  Nonpriority Creditor's Name  Attn: Officer  PO Box 3427  Bloomington, IL 61702  Number Street City State Zip Code  Who incurred the debt? Check one.  □ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more t laim. For each claim listed, identify what type of claim it is. Do not list claims already it creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	included in Part he Continuation  Total claim	1. If more Page of
AFNI, Inc.  Nonpriority Creditor's Name Attn: Officer PO Box 3427 Bloomington, IL 61702 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more talaim. For each claim listed, identify what type of claim it is. Do not list claims already it creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did no report as priority claims	included in Part he Continuation  Total claim	1. If more Page of
AFNI, Inc.  Non You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2.  AFNI, Inc.  Nonpriority Creditor's Name  Attn: Officer  PO Box 3427  Bloomington, IL 61702  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	this form to the court with your other schedules.  e alphabetical order of the creditor who holds each claim. If a creditor has more t laim. For each claim listed, identify what type of claim it is. Do not list claims already it creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did no	included in Part he Continuation  Total claim	1. If more Page of

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	1 Louis Anthony Mays 2 Stephanie Florence Mays	Case number (if known)	
4.2	Babcock	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Officer PO Box 497	When was the debt incurred?	¥2.22
	Mulberry, FL 33860  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Bull City Financial Solution Nonpriority Creditor's Name	Last 4 digits of account number	\$106.00
	Attn: Officer 2609 N. Duke St.	When was the debt incurred?	
	Durham, NC 27704  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.4	Campus Credit Union	Last 4 digits of account number 0404	\$11,861.00
	Nonpriority Creditor's Name		<del></del>
	Attn: Officer 1900 SW 34th St.	When was the debt incurred?	
	Gainesville, FL 32608  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Vol Surrender	

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Debto Debto	r 1 Louis Anthony Mays r 2 Stephanie Florence Mays	Case number (if known)	
4.5	Capital One	Last 4 digits of account number 3750	\$480.64
	Nonpriority Creditor's Name Attn: Officer PO Box 30285	When was the debt incurred?	
	Salt Lake City, UT 84130-0285  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.6	CarMax Auto Finance Nonpriority Creditor's Name	Last 4 digits of account number 87	\$1,717.00
	Attn: Officer PO Box 3174	When was the debt incurred?	
	Milwaukee, WI 53201  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or the date year me, the stain is. One of all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge off	
4.7	Choice Recovery	Last 4 digits of account number	\$21.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	Attn: Officer 1550 Old Henderson Rd. #100 Columbus, OH 43220	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	
	<b>—</b> 163	Other. Specify	

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	Louis Anthony Mays Stephanie Florence Mays	Case number (if known)	
4.8	Comenity Bank	Last 4 digits of account number	\$1,126.00
	Nonpriority Creditor's Name Attn: Officer PO Box 182125	When was the debt incurred?	
	Columbus, OH 43218-2125  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases-Lane Bryant	
4.9	Comenity Capital Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,008.00
	Attn: Officer PO Box 183043	When was the debt incurred?	
	Columbus, OH 43218-3043  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases-Ann Taylor	
4.1	Comenity Capital Bank	Last 4 digits of account number	\$901.00
	Nonpriority Creditor's Name Attn: Officer PO Box 183043	When was the debt incurred?	
	Columbus, OH 43218-3043  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	LI TES	■ Other. Specify Credit Card Purchases-Torrid	

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Louis Anthony Mays Stephanie Florence Mays	Case number (if known)	
Credit Collections	Last 4 digits of account number 0401	\$30.0
Nonpriority Creditor's Name Attn: Officer 16 Distriubtor Drive, Ste. 1 Morgantown, WV 26501	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
Credit Management Nonpriority Creditor's Name	Last 4 digits of account number	\$982.0
Attn: Officer 6080 Tennyson Pkwy, Ste. 100 Plano, TX 75024	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Collection	
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$929.0
Attn: Officer PO Box 98873	When was the debt incurred?	
Las Vegas, NV 89193	_	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
■ Debtor 2 only	☐ Contingent ☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit Card Purchases	

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Duke Primary Care	Last 4 digits of account number 4128	\$266.
Nonpriority Creditor's Name  Attn: Officer	When was the debt incurred?	
5213 South Alston Ave.		
Durham, NC 27713		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Emikash Property Management, Inc	Last 4 digits of account number 0179	\$25,000.
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ20,000.
Attn: Officer	When was the debt incurred?	
9717 SW 32nd Lane		
Gainesville, FL 32608  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only		
_	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Judgment	
Enhanced Recovery Corporation	Last 4 digits of account number	\$634.
Nonpriority Creditor's Name	Last 4 digits of account number	ψ00-1.
Attn: Officer	When was the debt incurred?	
8014 Bayberry Rd.		
Jacksonville, FL 32256-7412  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and and you may and ordinated officers an area apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Collection	

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Debtor Debtor	1 Louis Anthony Mays 2 Stephanie Florence Mays	Case number (if known)	
4.1 7	FedLoan Servicing	Last 4 digits of account number 8272	\$101,017.01
	Nonpriority Creditor's Name Attn: Officer PO Box 69184 Harrisburg, PA 17106-9184	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Loan	
4.1 8	FedLoan Servicing	Last 4 digits of account number 1085	\$46,179.92
	Nonpriority Creditor's Name Attn: Officer PO Box 69184	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community debt	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that you did not</li></ul>	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify  Student Loan	
4.1 9	Fingerhut Credit Services  Nonpriority Creditor's Name	Last 4 digits of account number 3987	\$1,264.53
	Attn: Officer PO Box 1250	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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	r 1 Louis Anthony Mays r 2 Stephanie Florence Mays	Case number (if known)	
4.2	First Premier Bank	Last 4 digits of account number	\$731.00
	Nonpriority Creditor's Name		
	Attn: Officer	When was the debt incurred?	
	PO Box 5524 Sioux Falls, SD 57117-5524		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	
1.2	Florida Credit Union	Last 4 digits of account number 03L2	\$1,063.97
	Nonpriority Creditor's Name		**,******
	Attn: Officer	When was the debt incurred?	
	PO Box 5549		
	Gainesville, FL 32627	As of the date was file the plaint in Observal all that some	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	_	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•	□ Debts to pension or profit-sharing plans, and other similar debts	
	No —	_	
	Yes	■ Other. Specify Loan	
.2	FMC_Omaha Services	Last 4 digits of account number	\$7,189.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Attn: Officer PO Box 542000	when was the dept incurred?	
	Omaha. NE 68154		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Possible deficiency owed after sale of	
	Yes	Other. Specify vehicle	

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IC Systems	Last 4 digits of account number	\$135.
Nonpriority Creditor's Name  Attn: Officer	When was the debt incurred?	
PO Box 64378	When was the dept incurred:	
Saint Paul, MN 55164		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection	
IC Systems		<b>¢</b> 270
IC Systems Nonpriority Creditor's Name	Last 4 digits of account number	\$270.
Attn: Officer	When was the debt incurred?	
PO Box 64378		
Saint Paul, MN 55164		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Поли	
_	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
uebt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
10 0		<b>*</b> 07
IC Systems Nonpriority Creditor's Name	Last 4 digits of account number	\$97.
Attn: Officer	When was the debt incurred?	
PO Box 64378		
Saint Paul, MN 55164	As of the date confile the plain in Object all that and	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 1 only  Debtor 2 only		
	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Collection	

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Kohl's	Last 4 digits of account number	\$1,086.0
Nonpriority Creditor's Name	Last 4 digits of account number	<b>4</b> 1,00010
Attn: Officer	When was the debt incurred?	
PO Box 3043		
Milwaukee, WI 53201-3043 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit Card Purchases	
MJ Altman Companies		\$112.0
Nonpriority Creditor's Name	Last 4 digits of account number	ΨΠΖ.
Attn: Officer	When was the debt incurred?	
205 S Magnolia Ave.		
Ocala, FL 34471	-	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Dobligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
Moneylion of North Carolina, LLC	Last 4 digits of account number 1056	\$253.8
Nonpriority Creditor's Name	<del></del>	
Attn: Officer	When was the debt incurred?	
PO Box 1547 Sandy, UT 84091		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	

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Louis Anthony Mays  Stephanie Florence Mays	Case number (if known)	
Moneylion of North Carolina, LLC	Last 4 digits of account number 5051	\$452.0
Nonpriority Creditor's Name Attn: Officer PO Box 1547	When was the debt incurred?	
Sandy, UT 84091  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
National Recoveries, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 5133	\$39,590.4
Attn: Officer PO Box 12066	When was the debt incurred?	
Saint Paul, MN 55112  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	Student Loan	
Online Information Services Nonpriority Creditor's Name	Last 4 digits of account number 2325	\$118.0
Attn: Officer PO Box 1489 Winterville, NC 28590	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection	

	1 Louis Anthony Mays 2 Stephanie Florence Mays	Case number (if known)					
4.3	Professional Recovery	Last 4 digits of account numb	er	\$487.00			
	Nonpriority Creditor's Name Attn: Officer 2700 Meridian Parkway, Ste. 200 Durham, NC 27713	When was the debt incurred?		-			
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsect	ured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a s	eparation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No		aring plans, and other similar debts				
	Yes	Other. Specify Collection	on	-			
4.3	WakeMed	Last 4 digits of account numb	er 5770	\$298.89			
	Nonpriority Creditor's Name Attn: Officer PO Box 29516	When was the debt incurred?		-			
	Raleigh, NC 27626  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsect	ured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims	eparation agreement or divorce that you did not				
	■ No	Debts to pension or profit-sh	aring plans, and other similar debts				
	Yes	Other. Specify Medical		-			
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed					
is tryii have r	ng to collect from you for a debt you owe to	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	at you already listed in Parts 1 or 2. For examp r in Parts 1 or 2, then list the collection agenc dditional creditors here. If you do not have add	y here. Similarly, if you			
	nd Address Law Group, P.A.	On which entry in Part 1 or Part 2 did Line <b>4.15</b> of ( <i>Check one</i> ):					
Attn: 0	Difficer NW 40th Terrace, Suite B	Line <u>4.15</u> of ( <i>Check one).</i>	☐ Part 1: Creditors with Priority Unsecured Clai ☐ Part 2: Creditors with Nonpriority Unsecured				
Gaine	sville, FL 32606	Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Come	nity Capital Bank	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ims			
2795 C	Officer Cottonwoon Pkwy., Ate. 100		■ Part 2: Creditors with Nonpriority Unsecured	Claims			
Salt La	ake City, UT 84121	Last 4 digits of account number					
Name ar	nd Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
First F	Premier Bank	Line 4.20 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ims			
601 S	Officer Minnesota Ave. Falls, SD 57104		■ Part 2: Creditors with Nonpriority Unsecured	Claims			

Debtor 1 Louis Anthony Mays Debtor 2 Stephanie Florence Mays		Case number (if known)
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
LVNV Funding, LLC	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Officer PO Box 10497		■ Part 2: Creditors with Nonpriority Unsecured Claims
Greenville, SC 29603		
C. 135.11.11.11.11.11.11.11.11.11.11.11.11.11	Last 4 digits of account number	

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 186,787.35
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,479.92
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 246,267.27

Fill in this inform	nation to identify your	case:			
Debtor 1	Louis Anthony M	ays			
	First Name	Middle Name	Last Name		
Debtor 2	Stephanie Floren	ce Mays			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA		
Case number				☐ Check if this amended fili	

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	NPRTO South-East LLC Attn: Officer 256 West Data Drive Draper, UT 84020	Lease for washer and dryer. Debtor will assume lease.
2.2	Progressive Residential	Home lease. Lease expires 3/2020. Debtor will assume lease.
2.3	Verizon	Cell phone contracts. Contract expires 12/2020. Debtor will assume lease.

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		10/17/19 5:15PM
Fill in th	nis information to identify your case:	
Debtor 1	Louis Anthony Mays	
		Name
Debtor 2 (Spouse if,		Name
	States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH C	
•		
Case nu (if known)	imber	☐ Check if this is an amended filing
Offici	al Farm 106H	
	al Form 106H	
Sche	edule H: Your Codebtors	12/15
your nan	, and number the entries in the boxes on the left. Attach the Additione and case number (if known). Answer every question. O you have any codebtors? (If you are filing a joint case, do not list either.)	
1. ບ	o you have any codebtors? (If you are filing a joint case, do not list eit	ner spouse as a codeptor.
□ N ■ Y		
	Vithin the last 8 years, have you lived in a community property state ona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Te	
	No. Go to line 3.  'es. Did your spouse, former spouse, or legal equivalent live with you at	the time?
шт	es. Did your spouse, former spouse, or legal equivalent live with you at	the time!
in li: Fori		a codebtor if your spouse is filing with you. List the person shown ner. Make sure you have listed the creditor on Schedule D (Official ial Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Beatrice Mays 3447 Pipping Plover Raleigh, NC 27616	☐ Schedule D, line ■ Schedule E/F, line4.22 ☐ Schedule G FMC_Omaha Services
3.2	Lester Hopkins 4416 SW 74th Terr Apt 2 Gainesville, FL 32608	☐ Schedule D, line ■ Schedule E/F, line4.15 ☐ Schedule G Emikash Property Management, Inc

Schedule H: Your Codebtors

Fill	in this information to identify your o	case:		
Deb	totor 1 Louis Antho	ony Mays		
	otor 2 Stephanie F	Florence Mays		
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF NORTH CAROLINA	
O'Be a sup spo	plying correct information. If you use. If you are separated and you	ssible. If two married pec are married and not fili ur spouse is not filing w	ng jointly, and your spouse is li ith you, do not include informat	Check if this is:  An amended filing A supplement showing postpetition chapter 13 income as of the following date:  MM / DD/ YYYYY  12/15  and Debtor 2), both are equally responsible for ving with you, include information about your spouse. If more space is needed, d case number (if known). Answer every question
Par				
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Telecommunications	Banker
	Include part-time, seasonal, or self-employed work.	Employer's name	Verizon	Bank of America
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed t	here? 10 Months	1 1/2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 4,138.75 \$ 3,572.51
3. +\$ 0.00 +\$ 0.00

For Debtor 2 or

3,572.51

For Debtor 1

4,138.75

4

Official Form 106I Schedule I: Your Income page 1

Debto Debto		Stephanie Florence Mays	_		Case	number (if ki	nown)				
					For	Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$_	4,138	3.75	\$		572.51	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	312	2.22	\$	;	359.49	
	5b.	Mandatory contributions for retirement plans	5k	Э.	\$		0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50		\$_		2.77	\$_	-	178.62	
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$_ \$		71.22	•
	5e. 5f.	Insurance Domestic support obligations	5e 5f		\$_ \$		0.41 0.00	φ_		422.83 0.00	
	5g.	Union dues	50		\$ -		0.00	ς \$		0.00	
	5h.	Other deductions. Specify: Fitness Center		n.+	\$_		2.50	+ \$ -		0.00	
		HYATT	_		\$		0.00	\$		14.50	•
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	667	7.90	\$	1,	046.66	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,470	0.85	\$	2,	525.85	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$	(	0.00	\$		0.00	
	8b.	Interest and dividends	8k	٥.	\$	(	0.00	\$		0.00	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	<b>t</b> 80 80		\$_ \$		0.00 0.00	\$_ \$		0.00	
	8e.	Social Security	86		\$		0.00	\$		0.00	•
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8f		\$_ \$		0.00 0.00	\$_ \$_		0.00	
	8g. 8h.	Other monthly income. Specify:	8¢ 8k	y. h.+	<b>\$</b> -		0.00	+ \$ -		0.00	
				Г			7.00	Ť		0.00	¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$_		0.00	)
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,470.85	+ \$	2,	525.85	= \$	5,996.70
	Incluothe Othe Dou	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, you er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep			•			Schedule 11.		0.00
		I the amount in the last column of line 10 to the amount in line 11. The re- te that amount on the Summary of Schedules and Statistical Summary of Certallies							e. 12.	\$	5,996.70
									L	Combir	
	Do :	you expect an increase or decrease within the year after you file this form No.	1?							monthly	y income
		Yes. Explain: Since January 2019 the Debtors have been under ends meet. They will be increasing their withhous				ing taxes	fron	thei	paych	eck to I	make

Official Form 106l Schedule I: Your Income page 2

						ı		
Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Louis Antho	ny Mays				eck if this is:	
	otor 2 ouse, if filing)	Stephanie Fl	lorence N	lays			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF NORTH	I CAROLINA		MM / DD / YYYY	
1	se number nown)							
		rm 106J						
Be info	as complete a		possible.	If two married people ar ch another sheet to this				
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold					
١.	□ No. Go to							
	_	s Debtor 2 live	in a separa	ate household?				
	■ N	0		al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	□ No		·			
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state				0		_	□ No
	dependents	names.			Son			■ Yes □ No
					Daughter		2 1/2	■ Yes
								□ No
								☐ Yes
								□ No
2	Da		_					☐ Yes
3.	expenses o	enses include f people other t d your depende	han $_{\square}$	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
the	lude expense value of sucl ficial Form 10	n assistance an	non-cash o d have inc	government assistance i luded it on <i>Schedule I:</i> \	f you know our Income		Your exp	enses
•		·						
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4.	\$	1,685.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter'	s insurance		4b.	·	0.00
	•	•	-	pkeep expenses		4c.	:	20.00
_	4d. Home	owner's associat				4d.	\$	0.00

5. \$

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1	Louis Anthony Mays			
Debtor 2	Stephanie Florence Mays	Case num	nber (if known)	
S. Utiliti				
6a.	Electricity, heat, natural gas	6a.	· <u> </u>	150.00
	Water, sewer, garbage collection	6b.	· :	65.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· -	300.00
6d.	Other. Specify:	6d.	· <u> </u>	0.00
	and housekeeping supplies	7.	·	410.00
	care and children's education costs	8.	·	433.33
	ing, laundry, and dry cleaning	-	\$	75.00
	onal care products and services	10.		75.00
	cal and dental expenses	11.	\$	311.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	300.00
	ot include car payments. tainment, clubs, recreation, newspapers, magazines, and books	13.	· ·	50.00
	table contributions and religious donations	14.	· <u> </u>	563.33
5. Insur		14.	Ψ	363.33
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	199.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		· <del></del>	
Speci	fy:	16.	\$	0.00
	Ilment or lease payments:	47-	•	
	Car payments for Vehicle 1	17a.	·	555.81
	Car payments for Vehicle 2	17b.	· —	612.62
	Other. Specify: Washer and Dryer	17c.	·	180.00
	Other. Specify:	17d.	\$	0.00
3. Your	payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	<b>s</b> 18.	\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Speci		19.	· <u> </u>	0.00
	real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	: Specify:	21.	+\$	0.00
	· · -		<u> </u>	
	late your monthly expenses			
	Add lines 4 through 21.		\$	5,985.09
22b. (	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	5,985.09
	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	5,996.70
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,985.09
23c.	Subtract your monthly expenses from your monthly income.			4
-	The result is your monthly net income.	23c.	\$	11.61
For ex	bu expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			ase or decrease because of a
■ Ye		1 year.		

Fill in this info	rmation to identify your	case:				
Debtor 1	Louis Anthony M	avs				
	First Name		Last	Name		
Debtor 2	Stephanie Floren	ce Mays				
(Spouse if, filing)	First Name	Middle Name	Last	Name		
United States B	Sankruptcy Court for the:	EASTERN DISTRICT OF NORTH	ΗС	AROLINA		
Case number						
(if known)						Check if this is an
						amended filing
Official For	m 106Dec					
Declara	tion About a	an Individual Deb	t	r's Schedules		12/15
Deciara	tion About 6	iii iiiaiviaaai beb		or 3 deficacies		12/13
If two married r	soonlo aro filing togotho	r, both are equally responsible for		innlying correct information		
ii two iiiai iieu p	beopie are ming together	i, both are equally responsible for	30	applying correct information.		
		ile bankruptcy schedules or amen				
		n connection with a bankruptcy ca	ase	e can result in fines up to \$250,0	00, or imp	orisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.				
c:	mn Balaur					
Sig	gn Below					
Did you p	ay or agree to pay some	one who is NOT an attorney to he	elp	you fill out bankruptcy forms?		
NI-						
■ No						
☐ Yes.	Name of person			Attach Bar	nkruptcy P	etition Preparer's Notice,
				Declaration	n, and Sig	nature (Official Form 119)
Under nen	alty of periury I declare	that I have read the summary and	l er	shedules filed with this declarati	on and	
•	re true and correct.	that I have read the Summary and	, 30	medules med with this decidrati	on and	
	uis Anthony Mays		X .	/s/ Stephanie Florence Mays	3	
	Anthony Mays			Stephanie Florence Mays		
Signati	ure of Debtor 1			Signature of Debtor 2		

Date October 17, 2019

Date **October 17, 2019** 

Debtor 1 Louis Antho	ny Mays		
First Name	Middle Name	Last Name	
Debtor 2 Stephanie Floring (Spouse if, filling) First Name	orence Mays  Middle Name	Last Name	
3,			
United States Bankruptcy Court for	the: EASTERN DISTRICT OF NOR	TH CAROLINA	
Case number			☐ Check if this is an amended filing
Official Form 107			
Statement of Financi	al Affairs for Individual	s Filing for Bankruptcy	4/1
	ded, attach a separate sheet to this fo	ng together, both are equally responsi orm. On the top of any additional page	
Part 1: Give Details About You	r Marital Status and Where You Lived	l Before	
. What is your current marital	status?		
■ Married □ Not married			
	you lived anywhere other than where	you live now?	
	you lived anywhere other than where	you live now?	
2. During the last 3 years, have	you lived anywhere other than where		
2. During the last 3 years, have	,		Dates Debtor 2 lived there
During the last 3 years, have  □ No ■ Yes. List all of the places	you lived in the last 3 years. Do not inclu  Dates Debtor 1	ide where you live now.	
During the last 3 years, have  No Yes. List all of the places  Debtor 1 Prior Address:  3447 Pipping Plover Dr	you lived in the last 3 years. Do not inclu  Dates Debtor 1 lived there  From-To:	Debtor 2 Prior Address:	lived there  Same as Debtor 1

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

■ No

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 2	, ,	ys	Cas	e number (if known)	
Part 2	Explain the Sources of You	ır Income			
Fill	you have any income from er in the total amount of income you are filing a joint case and you No Yes. Fill in the details.	ou received from all jobs and a	all businesses, including part	-time activities.	ndar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	anuary 1 of current year until e you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$40,548.97	■ Wages, commissions, bonuses, tips	\$35,668.31
		☐ Operating a business		☐ Operating a business	
	calendar year: ry 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$18,112.00	■ Wages, commissions, bonuses, tips	\$32,778.00
		☐ Operating a business		☐ Operating a business	
	calendar year before that: y 1 to December 31, 2017 )	■ Wages, commissions, bonuses, tips	\$27,814.00	■ Wages, commissions, bonuses, tips	\$41,936.00
		☐ Operating a business		☐ Operating a business	
and win	ude income regardless of wheth other public benefit payments; nings. If you are filing a joint cas each source and the gross inco	pensions; rental income; interse and you have income that your from each source separa	rest; dividends; money collect you received together, list it c	ted from lawsuits; royalties; ar only once under Debtor 1. hat you listed in line 4.  Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	calendar year: y 1 to December 31, 2018 )		\$0.00	401k Withdrawal	\$16,258.00
Part 3:	individual primarily for a  During the 90 days befo  No. Go to line 7  Yes List below e paid that cre not include	's debts primarily consume Debtor 2 has primarily consume personal, family, or househoute you filed for bankruptcy, distributed and the properties of the properties of the properties of the primary for the	r debts?  Jumer debts. Consumer debtald purpose."  Id you pay any creditor a total data a total of \$6,825* or more into for domestic support oblighis bankruptcy case.	s are defined in 11 U.S.C. § 10 I of \$6,825* or more?  n one or more payments and a pations, such as child support a corrupt or after the date of adjustmen	the total amount you and alimony. Also, do

	btor 1 Louis Anthony Mays btor 2 Stephanie Florence May	s	Cas	se number (if known)	
		both have primarily consumer de e you filed for bankruptcy, did you p		al of \$600 or more	?
	include paym				you paid that creditor. Do not Also, do not include payments to an
	attorney for t	his bankruptcy case.			
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Regional Acceptance Corpora		\$1,667.55	\$24,959.75	☐ Mortgage
	Attn: Officer PO Box 830913 Birmingham, AL 35283	September			■ Car □ Credit Card □ Loan Repayment
					☐ Suppliers or vendors ☐ Other
	American Credit Acceptance	July, August and	\$1,836.00	\$25,364.91	☐ Mortgage
	Attn: Officer 961 E. Main Street	September			■ Car
	Spartanburg, SC 29302				☐ Credit Card
	3,				☐ Loan Repayment ☐ Suppliers or vendors
					Other
	a business you operate as a sole pro alimony.	oprietor. 11 U.S.C. § 101. Include pa	ayments for domestic	support obligation	ny managing agent, including one fo ns, such as child support and
			ayments for domestic	support obligation	ny managing agent, including one lo
	alimony.		ayments for domestic  Total amount  paid	Amount you still owe	Reason for this payment
	alimony.  □ No ■ Yes. List all payments to an ins	ider.	ayments for domestic	Support obligation  Amount you	ns, such as child support and
8.	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for the	Dates of payment 3/2019	Total amount paid	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)
8.	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays	Dates of payment 3/2019  pankruptcy, did you make any pa	Total amount paid	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)
8.	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for binsider?	Dates of payment 3/2019  pankruptcy, did you make any pa	Total amount paid	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)
8.	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante	Dates of payment 3/2019  Dankruptcy, did you make any pa ed or cosigned by an insider.	Total amount paid	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)
8.	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante	Dates of payment 3/2019  Dankruptcy, did you make any pa ed or cosigned by an insider.	Total amount paid	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)
	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante  No Yes. List all payments to an ins Insider's Name and Address	Dates of payment 3/2019  Dankruptcy, did you make any particle or cosigned by an insider.	Total amount paid \$1,000.00	Amount you still owe \$0.00	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)  ccount of a debt that benefited an Reason for this payment
Pa	alimony.  No Yes. List all payments to an ins Insider's Name and Address Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante  No Yes. List all payments to an ins Insider's Name and Address	Dates of payment  3/2019  Dankruptcy, did you make any pa ed or cosigned by an insider.  Dates of payment  Dates of payment	Total amount paid \$1,000.00  Total amount paid amount paid amount paid amount paid amount paid	Amount you still owe \$0.00  Amount you still owe still owe still owe	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)  ccount of a debt that benefited an Reason for this payment Include creditor's name
Pa	alimony.  No Yes. List all payments to an ins Insider's Name and Address  Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante  No Yes. List all payments to an ins Insider's Name and Address  rt 4: Identify Legal Actions, Repo	Dates of payment  3/2019  Dankruptcy, did you make any pa ed or cosigned by an insider.  Dates of payment  Dates of payment	Total amount paid \$1,000.00  Total amount paid amount paid amount paid amount paid amount paid	Amount you still owe \$0.00  Amount you still owe still owe still owe	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)  ccount of a debt that benefited an Reason for this payment Include creditor's name
<b>Pa</b> 9.	alimony.  ☐ No ☐ Yes. List all payments to an ins Insider's Name and Address  Louis H. Mays  Within 1 year before you filed for kinsider? Include payments on debts guarante ☐ No ☐ Yes. List all payments to an ins Insider's Name and Address  Identify Legal Actions, Report List all such matters, including persomodifications, and contract disputes. ☐ No ☐ No	Dates of payment  3/2019  Dankruptcy, did you make any pa ed or cosigned by an insider.  Dates of payment  Dates of payment	Total amount paid \$1,000.00  Total amount paid amount paid amount paid amount paid amount paid	Amount you still owe \$0.00  Amount you still owe still owe still owe	Reason for this payment  Loan (Money was borrowed for 2 days and repaid. Loan was needed to prevent repossession of vehicle.)  ccount of a debt that benefited an Reason for this payment Include creditor's name

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	otor 1 Louis Anthony Mays Stephanie Florence Mays		Case number	(if known)	
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
	Emikash Property Management, Inc. vs Louis Mays and Stephanie Hopkins 2018-CA-00179	Judgment	Eight Judicial Circuit	Pending On appe	eal
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		perty repossessed, foreclosed	l, garnished, attached	d, seized, or levied?
	☐ No. Go to line 11.				
	Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happened	ed		
	N.C. Dept of Revenue Office Service Div. Bankruptcy Unit PO Box 1168	Garnish \$190.00 pe  ☐ Property was reposs		9/6	\$190.00
	Raleigh, NC 27602-1168	☐ Property was foreclo	osed.		
		■ Property was garnis	hed.		
		☐ Property was attach	ed, seized or levied.		
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		perty in the possession of an	taken assignee for the bene	efit of creditors, a
	☐ Yes				
Part	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	otcy, did you give any gif	ts with a total value of more t	han \$600 per person <sup>r</sup>	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	S	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup  ☐ No	tcy, did you give any gif	ts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con	tribution.			
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what yo	ou contributed	Dates you contributed	Value
	Victorias Praise		e these payments for the e 6 months prior to that per month.	Bi-weekly	\$260.00

Debte Debte	, ,		C	Case number (if	f known)	
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		escribe what you contributed		Dates you contributed	Value
	Alive	Ti Oi Oi	ithe (Debtor made these payn ne year but stopped giving to rganization about 1 year ago elocated to NC).	this	Bi-weekly	\$100.00
Part	6: List Certain Losses					
15. <b>V</b>	Within 1 year before you filed for bankr or gambling?	uptcy or sind	ce you filed for bankruptcy, did y	ou lose anyth	ing because of theft	, fire, other disaster,
[	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include the	any insurance coverage for the lost amount that insurance has paid. Lost claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Part	7: List Certain Payments or Transfe			.,,		
[	Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Do tra	r credit counseling agencies for serverseling agencies for serverselin	·	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling 17337 Ventura Boulevard Encino, CA 91316	С	redit Counseling		Balance paid immediately prior to filing.	\$25.00
p	Within 1 year before you filed for bankr promised to help you deal with your crubo not include any payment or transfer the	editors or to	make payments to your creditors		transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.  Person Who Was Paid  Address		escription and value of any prope ansferred	erty	Date payment or transfer was made	Amount of payment
t li	Within 2 years before you filed for bank transferred in the ordinary course of you likely both outright transfers and transfer include gifts and transfers that you have a No	our business rs made as s	or financial affairs? ecurity (such as the granting of a se			
[	Yes. Fill in the details.					
	Person Who Received Transfer Address		escription and value of roperty transferred		ny property or received or debts hange	Date transfer was made
	Person's relationship to you					

	btor 1 Louis Anthony Mays Stephanie Florence Mays			Case nun	nber (if known)	
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset No Yes. Fill in the details.		any property to	a self-settle	ed trust or similar device	e of which you are a
	Name of trust	Description and	I value of the pr	operty tran	sferred	Date Transfer was made
Par	rt 8: List of Certain Financial Accounts,	, Instruments, Safe Depos	sit Boxes, and S	Storage Uni	ts	
20.	Within 1 year before you filed for bankru sold, moved, or transferred? Include checking, savings, money marke houses, pension funds, cooperatives, as □ No	et, or other financial acco	unts; certificate	es of depos		
	Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accinstrument	ount or	Date account was closed, sold, moved, or	Last balance before closing or transfer
	Florida Credit Union	XXXX-	■ Checking □ Savings □ Money M: □ Brokerage	arket	transferred 10/16/19	\$0.00
21.	Do you now have, or did you have within cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had a	ccess to it?		posit box or other depo	Do you still have it?
22.	□ No	State and ZIP Code)	ur home within	1 year befo	re you filed for bankrup	tcy?
	■ Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code	Who else has of to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
	Public Storage 5602 Capital Blvd Raleigh, NC 27616	Debtors'			nold items from when moved from Florida	■ No □ Yes
Par	rt 9: Identify Property You Hold or Cont	rol for Someone Else				
23.			clude any prope	erty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the pro (Number, Street, City Code)		Describe	the property	Value

**Louis Anthony Mays** Debtor 1 Debtor 2 **Stephanie Florence Mays** 

Case number (if known)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.								
Rep	port all notices, releases, and proceedings that	at you know about, regardless of when	they occurred.						
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements a	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	rt 11: Give Details About Your Business or (	Connections to Any Business							
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to any	business?					
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	ip (LLP)						
	☐ A partner in a partnership								
	■ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation							
	☐ No. None of the above applies. Go to P	art 12.							
	Yes. Check all that apply above and fill	in the details below for each business	<b>3.</b>						
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security						
		·	Dates business existed						
	Eagle Eyez, Inc. d/b/a Top Flight Elite, INC	Non Profit Travel Basketball league. Does not make any profit	EIN: :. From-To 2017 to present						

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10/17/19 5:15PM

Debtor 1 Louis Anthony Mays
Debtor 2 Stephanie Florence Mays

(Number, Street, City, State and ZIP Code)

**Address** 

Case number (if known)

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fin institutions, creditors, or other parties.				
	■ No □ Yes. Fill in the details below.			
	Nama	Date Issued		

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Debtor Debtor			Case number (if known)
Part 12	Sign Below		
are true		statement	and any attachments, and I declare under penalty of perjury that the answers t, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Lo	uis Anthony Mays	/s/ Ste	tephanie Florence Mays
Louis	Anthony Mays ure of Debtor 1	•	hanie Florence Mays ature of Debtor 2
Date	October 17, 2019	Date	October 17, 2019
Did you ■ No □ Yes	attach additional pages to Your Statement of I	Financial <i>i</i>	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you ■ No	pay or agree to pay someone who is not an att	torney to	help you fill out bankruptcy forms?
☐ Yes.	Name of Person Attach the Bankruptcy Pe	etition Prei	enarer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Louis Anthony M	ays		
	First Name	Middle Name	Last Name	
Debtor 2	Stephanie Floren	ce Mays		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is an

### Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Acceptance Now name:  Description of Mattress (Purchased 3/2019) property securing debt:	■ Surrender the property.  □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No ■ Yes
Creditor's American Credit Acceptance name:  Description of property securing debt:  American Credit Acceptance 2016 Infiniti Q50 40,000 miles Sedan 4D 2.0T Premium AWD 2.0L I4	<ul> <li>□ Surrender the property.</li> <li>□ Retain the property and redeem it.</li> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	□ No ■ Yes
Creditor's Capital One name:  Description of property \$Secured Capital One Card \$200.00	<ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	□ No ■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	thony Mays e Florence Mays	Case number (if known)	
securing debt:			_
Creditor's Conn'	s Applicance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of <b>Su</b>	rface Pro Laptop	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		■ Retain the property and [explain]: Retain and voluntarily make payments	_
Creditor's <b>NPRT</b> name:	O South-East LLC	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of <b>Wa</b>	sher and Dryer	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		Retain the property and [explain]: Assume Lease	_
Creditor's Regio	nal Acceptance Corporation	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	17 Nissan Altima 70,000 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property <b>Se</b> securing debt:	dan 4D SR 2.5L I4	■ Retain the property and [explain]: Retain and voluntarily make payments	_
Part 2: List Your U	nexpired Personal Property Leases		
For any unexpired per in the information belo	rsonal property lease that you listed ow. Do not list real estate leases. Un	in Schedule G: Executory Contracts and Unexpire expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe your unexp	ired personal property leases		Will the lease be assumed?
Lessor's name:	NPRTO South-East LLC		□ No
			■ Yes
Description of leased Property:	Lease for washer and dryer. De	ebtor will assume lease.	

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Debtor 1		
Debtor 2	Stephanie Florence Mays	Case number (if known)
Part 3:	Sign Below	
Under po		ed my intention about any property of my estate that secures a debt and any personal
Under perty	enalty of perjury, I declare that I have indicate	ed my intention about any property of my estate that secures a debt and any personal  X /s/ Stephanie Florence Mays
Under poperty	enalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	
Under per property X /s/ Lo	enalty of perjury, I declare that I have indicate that is subject to an unexpired lease.  Louis Anthony Mays	X /s/ Stephanie Florence Mays

Fill in this information to identify your case:							
Debtor 1	Louis Anthony Mays						
Debtor 2 (Spouse, if filing)  Stephanie Florence Mays							
United States B	ankruptcy Court for the:	Eastern District of North Carolina					
Case number (if known)							

Check one box only as	directed i	in this	form	and i	n F	orm
122A-1Supp:						

- □ 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

### Official Form 122A - 1

## **Chapter 7 Statement of Your Current Monthly Income**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
    - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Debt	or 1	 tor 2 or filing spouse
2	<ol><li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before a payroll deductions).</li></ol>	all \$	4,132.72	\$ 3,982.12
3	<ol> <li>Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.</li> </ol>	\$	0.00	\$ 0.00
4	4. All amounts from any source which are regularly paid for household expense of you or your dependents, including child support. Include regular contribution from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	S	0.00	\$ 0.00
5	5. Net income from operating a business, profession, or farm			
	Debtor 1			
	Gross receipts (before all deductions) \$ 0.00			
	Ordinary and necessary operating expenses -\$ 0.00			
	Net monthly income from a business, profession, or farm \$ 0.00 Copy here	<b>-&gt;</b> \$	0.00	\$ 0.00
1	6. Net income from rental and other real property			
	Debtor 1			
	Gross receipts (before all deductions) \$0.00			
	Ordinary and necessary operating expenses -\$ 0.00			
	Net monthly income from rental or other real property \$ 0.00 Copy here	->\$	0.00	\$ 0.00
7	7. Interest, dividends, and royalties	\$	0.00	\$ 0.00
1	· · · · · · · · · · · · · · · · · · ·			

	Stephanie Florence Mays			Case num	ber ( <i>if known</i> )			
				Column Debtor 1		Column Debtor non-fili		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benefi	it under					
	For you\$	0.0	00					
	For your spouse \$	0.0	00					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as signot include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process to the amount of retired pay to which you if retired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other 1	nount received that was tated in the next senter r allowance paid by the ty, combat-related injur es. If you received any pay only to the extent the r would otherwise be en	nce, do e ry or retired hat it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, anr United States Government in connection with a disabilit disability, or death of a member of the uniformed servic sources on a separate page and put the total below.	ecify the source and am Security Act; payments manity, or international nuity, or allowance paid ty, combat-related injur	or d by the ry or					
	Referree Income			\$	57.57	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	each column. Then add the total for Column A to the to	tal for Column B.	\$	4,190.29	-   + \$ _	3,982.12		8,172.41
	2: Determine Whether the Means Test Applies to	o You	\$	4,190.29	*\$	3,982.17		urrent monthly
art	_	o You  Follow these steps:					Total c	urrent monthly
	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.	o You  Follow these steps:					Total c income	8,172.41
	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1	o You  Follow these steps:					Total c income	8,172.41
12.	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)	o You  Follow these steps:  form					Total c income	8,172.41
12.	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the	o You  Follow these steps:  form					Total c income	8,172.41
2.	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to year.	o You  Follow these steps:  form  you. Follow these step					Total c income	8,172.41
2.	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to 1  Fill in the state in which you live.	e form  you. Follow these steps  NC  4  of household. online using the link sp	os:	Co	ppy line 11	here=>	Total c income  \$	8,172.41
3.	Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to yell in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go	e form  you. Follow these steps  NC  4  of household. online using the link sp	os:	Co	ppy line 11	here=>	\$	8,172.41 2 98,068.92
12.	Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to 1  Fill in the state in which you live.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	e form  you. Follow these steps:  NC  4  of household. online using the link spruptcy clerk's office.	es:	Co	opy line 11	here=>	\$	8,172.41 2 98,068.92
12.	Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line 1  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to 1  Fill in the state in which you live.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a.   Line 12b is less than or equal to line 13. O	e form  you. Follow these steps:  NC  4  of household. online using the link spruptcy clerk's office.	eck box	in the sepa	opy line 11  arate instruc	here=>	\$	8,172.41 298,068.92 35,021.00
12.	Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to year.  Fill in the state in which you live.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a.   Line 12b is less than or equal to line 13. On Go to Part 3.  14b.   Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	e form  you. Follow these steps:  NC  4  of household. online using the link spruptcy clerk's office.	eck box	in the sepa	opy line 11  arate instruc	here=>	\$	8,172.41 12 98,068.92
12.	Calculate your current monthly income for the year.  12a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the Calculate the median family income that applies to year.  Fill in the state in which you live.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a.   Line 12b is less than or equal to line 13. On Go to Part 3.  14b.   Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	o You  Follow these steps:  NC  4  of household.  online using the link spruptcy clerk's office.  n the top of page 1, cheft of page 1, check box 2,	eck box	in the separate of the separat	arate instructions no presum of abuse is	here=> ctions nption of a	Total of income  \$	8,172.41 2 98,068.92 35,021.00

**Louis Anthony Mays** 

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Debtor 1 Debtor 2	Louis Anthony Mays Stephanie Florence Mays		Case number (if known)	
Da	October 17, 2019 MM / DD / YYYY	Date	October 17, 2019 MM / DD / YYYY	-
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this	form.		

Fill in this information to identify your case:							
Debtor 1 Louis Anthony Mays							
Debtor 2	Stephanie Florence	Mays					
(Spouse, if filing	1)						
United States B	ankruptcy Court for the:	Eastern District of North Carolina					
Case number (if known)							

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:

- 1. There is no presumption of abuse.
- $\square$  2. There is a presumption of abuse.
- ☐ Check if this is an amended filing

## Official Form 122A - 2

# **Chapter 7 Means Test Calculation**

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Determine Your Adjusted Income					
1.	Copy your total current monthly income. Copy	line 11 from Official	Form 122 <i>F</i>	A-1 here=>	\$	8,172.41
2.	Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.  ☐ Yes. Is your spouse Filing with you?  ☐ No. Go to line 3.  ☐ Yes. Fill in \$0 for the total on line 3.					
3.	Adjust your current monthly income by subtracting any part of household expenses of you or your dependents. Follow these s  On line 11, Column B of Form 122A–1, was any amount of the inco expenses of you or your dependents?  No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:	steps:			ed for the	household
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax de support other than you or your dependents.	ebt or to are sub	he amount otracting fr pouse's inc	om		
	Total.	\$ \$	0.00	Constatellers		0.00
4.	Adjust your current monthly income. Subtract line 3 from line 1.			Copy total here:	=> <b>-</b> \$	8,172.41

ebtor 2	Louis Anthony Mays Stephanie Florence Mays		Case number (if	known)	
art 2:	Calculate Your Deductions from Your Income				
to an	nternal Revenue Service (IRS) issues National and I swer the questions in lines 6-15. To find the IRS sta uctions for this form. This information may also be a	ındards, go online ι	using the link specific	ed in the separate	ounts
your a	ct the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. Ene in line 3 and do not deduct any operating expenses t	Do not deduct any an	nounts that you subtract	cted fro your spouse's	
If you	or expenses differ from month to month, enter the average	ge expense.			
Wher	never this part of the from refers to you, it means both you	ou and your spouse	if Column B of Form 12	22A-1 is filled in.	
5.	The number of people used in determining your dec	ductions from incor	me		
-	Fill in the number of people who could be claimed as explus the number of any additional dependents whom youthe number of people in your household.				
Natio	onal Standards You must use the IRS National	al Standards to answ	er the questions in line	es 6-7.	
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, an		in line 5 and the IRS N	National \$_	1,786.00
1	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The nurpeople who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	mber of people is spli a higher IRS allowa	it into two categories nce for health care cos	people who are under 6	55 and
Peop	le who are under 65 years of age				
	7a. Out-of-pocket health care allowance per person	\$ 55.00			
	7b. Number of people who are under 65	X4			
	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$220.00	Copy here=>	\$ 220.00	
Peop	le who are 65 years of age or older				
	7d. Out-of-pocket health care allowance per person	\$ 114.00			
	7e. Number of people who are 65 or older	X0			
	TO Contract March 19 To The Prince To	\$ 0.00	Copy here=>	+\$ 0.00	
	7f. <b>Subtotal.</b> Multiply line 7d by line 7e.				

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10/17/19 5:15PM

Debtor 1 Louis Anthony Mays
Debtor 2 Stephanie Florence Mays

Case number (if known)

Loc	al Sta	andards	You must use the IRS Local Star	ndards to ansv	wer the questio	ns in lin	es 8-15.				
			tion from the IRS, the U.S. Trus ses into two parts:	tee Program l	has divided th	e IRS L	ocal Standa	ard for housing	g for		
		_	tilities - Insurance and operating								
То	answ	er the qu	estions in lines 8-9, use the U.S.	. Trustee Pro	gram chart.						
			o online using the link specified in be available at the bankruptcy cl		instructions for	this forr	n.				
8.		_	utilities - Insurance and operati mount listed for your county for ins	• .	•				s, fill \$		649.00
9.	Hou	ısing and	utilities - Mortgage or rent expe	enses:							
	9a.	_	e number of people you entered in your county for mortgage or rent					\$ <b>1,5</b>	26.00		
	9b.	Total ave	erage monthly payment for all mor	tgages and oth	her debts secu	red by y	our home.				
		contractu	late the total average monthly pay ally due to each secured creditor uptcy. Then divide by 60.								
		Name of	the creditor		Average mont payment	thly					
		-NONE-			\$						
			Total average monthly	payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	3
	9c.	Net mort	gage or rent expense.								
			line 9b (total average monthly pay expense). If this amount is less than				\$	1,526.00	Copy here=>	\$	1,526.00
10.			hat the U.S. Trustee Program's alculation of your monthly expe					g is incorrect a	ınd	\$	0.00
	Ex	plain why:									
11.	Loc	al transp	ortation expenses: Check the nu	mber of vehicl	es for which yo	ou claim	an ownersh	ip or operating	expense.		
		). Go to lin	e 14.								
	<b>□</b> 1	I. Go to lin	e 12.								
	<b>2</b> 2	2 or more.	Go to line 12.								

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

420.00

\$

Debtor 1 Debtor 2		s Anthony Mays nanie Florence May	S			Case number	er ( <i>if known</i> )		
	You may		pense: Using the IRS Local if you do not make any loan						
Veh	nicle 1	Describe Vehicle 1:	2016 Infiniti Q50 40,000 2.0L I4	) miles Se	dan 4D 2.0	T Premi	um AWD	_	
13a.	Ownersh	ip or leasing costs usin	g IRS Local Standard			\$	508.00	<u>)</u>	
	•	monthly payment for al	I debts secured by Vehicle 1 vehicles.						
	are contr		y payment here and on line cured creditor in the 60 months			at			
	Nan	ne of each creditor fo	Vehicle 1	Average i	monthly				
	Am	erican Credit Acce	otance	\$\$	418.62				
		Total A	Average Monthly Payment	\$	418.62	Copy here =>	-\$	Repeat this amount on line 33b.	
		cle 1 ownership or leas line 13b from line 13a.  Describe Vehicle 2:	if this amount is less than \$0			\$_	89.38	Copy net Vehicle 1 expense here => \$	89.38
13d	Ownersh	in or leasing costs usin	2017 Nissan Altima 70,				508.00	_ 1	
13e.		monthly payment for al	I debts secured by Vehicle 2				300.00	<u>.</u>	
	Nan	ne of each creditor fo	r Vehicle 2	Average i	monthly				
	Reg	gional Acceptance	Corporation	\$	407.62				
		Total A	Average Monthly Payment	\$	407.62	Copy here => -\$	40	Repeat this amount on line 33c.	
		cle 2 ownership or leas line 13e from line 13d.	e expense if this amount is less than \$0	, enter \$0		. \$	100.38	Copy net Vehicle 2 expense here => \$	100.38
			: If you claimed 0 vehicles in ce regardless of whether you				dards, fill in t	he <i>Public</i> \$	0.00
	also dedi	uct a public transportati	on expense: If you claimed on expense, you may fill in was all Standard for <i>Public Trans</i>	hat you beli					0.00

**Louis Anthony Mays** 

Debtor 1 Debtor 2 Stephanie Florence Mays

Case number (if known)

Oth	er Necessary Expenses  In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	<b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	1,275.31
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	1.73
19.	<b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	433.33
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	91.58
23.	<b>Optional telephone and telephone services:</b> The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$	6,592.71

Debtor 1
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 5
Debtor 6
Debtor 7
Debtor 9
Debtor 9
Debtor 1
Debtor 2
Debtor 1
Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 3
Debtor 4
Debtor 4
Debtor 4
Debtor 7
Debtor 7
Debtor 7
Debtor 9
Deb

Additional Expense Deductions These are additional deductions allowed by the Means Test.								
		Note: I	Do not include ar	ny expe	nse allowances	listed in lines 6-24.		
25.	insura					ses. The monthly expenses for health y necessary for yourself, your spouse, or	or	
	Health	insurance		\$	598.22			
	Disabi	lity insurance		\$	12.59			
	Health	savings account	•	+ \$	0.00			
	Total			\$	610.81	Copy total here=>	\$	610.81
	Do you	u actually spend this total amount	?			•		
		No. How much do you actually s	pend?	¢.				
26.	continu	ue to pay for the reasonable and i	necessary care a ediate family who	ınd supp o is una	port of an elderl ble to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 9A(b).	\$	0.00
27.	27. <b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.							
	By law, the court must keep the nature of these expenses confidential.					\$	0.00	
28.	28. <b>Additional home energy costs.</b> Your home energy costs are included in your insurance and operating expenses on line 8.							
		believe that you have home energ of fill in the excess amount of home		more th	nan the home er	nergy costs included in expenses on line	•	
		ust give your case trustee docum nt claimed is reasonable and nece		actual e	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8					e monthly expenses (not more than han 18 years old to attend a private or		
		ust give your case trustee docum d is reasonable and necessary ar						
	* Subje	ect to adjustment on 4/01/22, and	every 3 years af	ter that	for cases begu	n on or after the date of adjustment.	\$	0.00
30.	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.							
		d a chart showing the maximum actions for this form. This chart may						
	You m	ust show that the additional amou	ınt claimed is rea	asonabl	e and necessar	y.	\$	0.00
31.		nuing charitable contributions. nents to a religious or charitable o				ntribute in the form of cash or financial	+\$	563.33
32.		II of the additional expense ded nes 25 through 31.	uctions.				\$	1,174.14

Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 5
Debtor 6
Debtor 9
Debtor 9
Debtor 1
Debtor 2
Debtor 1
Debtor 2
Debtor 1
Debtor 2
Debtor 2
Debtor 3
Debtor 3
Debtor 4
Debtor 4
Debtor 4
Debtor 5
Debtor 7
Debtor 7
Debtor 7
Debtor 7
Debtor 8
Debtor 9
Deb

Deductions for Debt Payment					
33. For debts that are secured by an inter loans, and other secured debt, fill in li	est in property that you own, including home	e mortgages, vehi	cle		
To calculate the total average monthly pacted to the following the follo	ayment, add all amounts that are contractually dobustics. Then divide by 60.	ue to each secured	d _		
Mortgages on your home:				Average monthly payment	
33a. Copy line 9b here			=>	\$ 0.00	
Loans on your first two vehicles:					
33b. Copy line 13b here			=>	\$ 418.62	_
				\$ 407.62	_
33d. List other secured debts:					
Name of each creditor for other secured debt	Identify property that secures the debt	Does pa include insuran	taxes or		
			lo		
Conn's Applicance	Surface Pro Laptop	_	es	\$ 18.57	
			CS	Ψ	_
NPPTO O II F I I O	W 15	■ N	lo	40.00	
NPRTO South-East LLC	Washer and Dryer	D Y	'es	\$ 12.00	_
			lo		
		D Y	'es	+\$	_
		. 050	Cop	al _	
33e. Total average monthly payment. Add I	ines 33a through 33d	\$856	her	e=> \$ 856.81	1
	secured by your primary residence, a vehic upport or the support of your dependents?	le,			
■ No. Go to line 35.					
	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ). e information below.				
Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount	
-NONE-		\$	÷ 60 =	= \$	_
					_
			Cor		
	Tota	ı s <b>0</b>	.00 tota	e=> \$0	.00
35. Do you owe any priority claims such a are past due as of the filing date of yo	is a priority tax, child support, or alimony - thur bankruptcy case? 11 U.S.C. § 507.	nat			
■ No. Go to line 36.					
☐ Yes. Fill in the total amount of all of ongoing priority claims, such a	these priority claims. Do not include current or s those you listed in line 19.				
Total amount of all past-due p	priority claims	\$0	.00 ÷ 60	= \$0	.00

		is Anthony Mays phanie Florence Mays		Case	number ( <i>if known</i>	)		
For	more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Basins</i> for this form. <i>Bankruptcy Basics</i> may also be availab	sics specif					
	No.	Go to line 37.						
	Yes.	Fill in the following information.						
		Projected monthly plan payment if you were filing under	r Chapter	· 13 \$	1	00.00		
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in	Alabama	6.0	<u>0</u>		
		To find a list of district multipliers that includes your dis the link specified in the separate instructions for this fo be available at the bankruptcy clerk's office.					Copy total	
		Average monthly administrative expense if you were fil	ing under	Chapter 13	\$6			6.00
		of the deductions for debt payment. es 33e through 36.					\$862.8	<u>11</u>
Total D	educ	tions from Income						
38. <b>Add</b>	d all c	of the allowed deductions.						
		ne 24, All of the expenses allowed under IRS e allowances	\$	6,592.71				
Co	opy lin	ne 32, All of the additional expense deductions	\$	1,174.14				
Co	opy lir	ne 37, All of the deductions for debt payment	+\$	862.81				
		Total deductions	\$	8,629.66	Copy total	here	=> \$8,62	<b>3.66</b>
Part 3:	Det	termine Whether There is a Presumption of Abuse						
39. <b>Cal</b>	culat	e monthly disposable income for 60 months						
39	a. Co	ppy line 4, adjusted current monthly income	\$	8,172.41				
39	b. Co	ppy line 38, Total deductions	-\$	8,629.66				
39		onthly disposable income. 11 U.S.C. § 707(b)(2). abtract line 39b from line 39a	\$	-457.25	Copy here=>\$		-457.25	
					_	x 60		
Fo	or the	next 60 months (5 years)						
		next 60 months (5 years)	20		27,435.00	Copy here=>	. \$	00_
39	9d. <b>To</b>	4al Multiply line 30a by 60	39	9d. \$	27,435.00	1	. \$	)0
39 40. <b>Fine</b>	d. <b>To</b> d out	otal. Multiply line 39c by 60	39 box that	d. \$	·	here=>		<u> </u>
39 40. <b>Fine</b>	d out The I	whether there is a presumption of abuse. Check the	39 box that a	applies:	re is no presu	here=>	of abuse. Go to Part 5.	
39 40. Find	d out The I The I	whether there is a presumption of abuse. Check the line 39d is less than \$8,175*. On the top of page 1 of the line 39d is more than \$13,650*. On the top of page 1 of the 190 is more than \$13,650*.	box that and some some some some some some some some	applies: sheck box 1, <i>Then</i> , check box 2, <i>Th</i>	re is no presu	here=>	of abuse. Go to Part 5.	

Debtor 1

ebtor 1 ebtor 2		s Anthony Mays hanie Florence Mays	Case	e number (if	known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If y A Summary of Your Assets and Liabilities and Certain Statistical In Schedules (Official Form 106Sum), you may refer to line 3b on the	nformation	\$	.25	٦	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 7070 Multiply line 41a by 0.25		\$		Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting all a our unsecured, nonpriority debt. e box that applies:		tions is	enough to pa	ay	
_	Line	39d is less than line 41b. On the top of page 1 of this form, check Part 5.	box 1, There i	s no pres	sumption of al	ouse.	
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this <i>imption of abuse.</i> You may fill out Part 4 if you claim special circums					
Part 4:	Giv	e Details About Special Circumstances					
reaso	onable	ve any special circumstances that justify additional expenses of alternative? 11 U.S.C. § 707(b)(2)(B).  to Part 5.	r adjustments	s of curre	ent monthly i	ncome fo	or which there is no
□ Y	ite	in the following information. All figures should reflect your average m. You may include expenses you listed in line 25.  u must give a detailed explanation of the special circumstances tha					ach
	ne	cessary and reasonable. You must also give your case trustee docu iustments.					
	G	ive a detailed explanation of the special circumstances			nthly expens djustment	se	
	_		\$				
	_		\$				
	_		\$				
	_		\$				
art 5:	_	n Below					
	By si	gning here, I declare under penalty of perjury that the information or	n this statemer	nt and in a	any attachme	nts is true	and correct.
			s/ Stephanie				
			Stephanie Fl Signature of De		iviays		
Da	ite O	ctober 17, 2019 Date (	October 17, 2	2019			
	MI	M/DD/YYYY	/M/DD/YYY	ΥY			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	:	Liquidation
\$2	45	filing fee
\$7	75	administrative fee
<u>+</u> \$	15	trustee surcharge
\$3	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-04819-5-SWH Doc 1 Filed 10/17/19 Entered 10/17/19 17:19:09 Page 76 of 79

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Eastern District of North Carolina

In r	Louis Anthony Mays  Stephanie Florence Mays		Case No.				
	Otophamo i forence mayo	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENS			. ,			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to			
				900.00			
	Prior to the filing of this statement I have received			0.00			
	Balance Due		\$	900.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	☐ Debtor ☐ Other (specify): <b>HYATT</b>						
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are mem	pers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul><li>a. Analysis of the debtor's financial situation, and rendering</li><li>b. Preparation and filing of any petition, schedules, statem</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul>	ent of affairs and plan which	may be required;				
6.	By agreement with the debtor(s), the above-disclosed fee defended Representation of the Debtor(s) in any act discharge of a particular debt of the Debtor tax advise, or credit repair.	ion or proceeding object	ting to the Debtor(	s) discharge, objecting to the to discharge student loans,			
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
	October 17, 2019	/s/ William G. Bei	ggren				
-	Date	William G. Bergg Signature of Attorne					
		Berggren Law Of					
		P.O. Box 18306	•				
		Raleigh, NC 2761 (919) 875-8773 F	9 <sup>:</sup> ax: (919) 875-0882	2			
		wgb@raleighban					
		Name of law firm					

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10/17/19 5:15PM

## United States Bankruptcy Court Eastern District of North Carolina

In re	Louis Anthony Mays Stephanie Florence Mays		Case No.	
		Debtor(s)	Chapter	7
The ab		FICATION OF CREDITOR  at the attached list of creditors is true and co		of their knowledge.
Date:	October 17, 2019	/s/ Louis Anthony Mays Louis Anthony Mays Signature of Debtor		
Date:	October 17, 2019	/s/ Stephanie Florence Mays		

Signature of Debtor

Acceptance Now Attn: Officer 6180 Capital Blvd. Raleigh, NC 27616

AFNI, Inc. Attn: Officer PO Box 3427 Bloomington, IL 61702

American Credit Acceptance Attn: Officer 961 E. Main Street Spartanburg, SC 29302

Babcock Attn: Officer PO Box 497 Mulberry, FL 33860

Bauer Law Group, P.A. Attn: Officer 3721 NW 40th Terrace, Suite B Gainesville, FL 32606

Beatrice Mays 3447 Pipping Plover Raleigh, NC 27616

Bull City Financial Solution Attn: Officer 2609 N. Duke St. Durham, NC 27704

Campus Credit Union Attn: Officer 1900 SW 34th St. Gainesville, FL 32608

Capital One Attn: Officer PO Box 30285 Salt Lake City, UT 84130-0285 Capital One Attn: Officer 4851 Cox Road Glen Allen, VA 23060

CarMax Auto Finance Attn: Officer PO Box 3174 Milwaukee, WI 53201

Choice Recovery Attn: Officer 1550 Old Henderson Rd. #100 Columbus, OH 43220

Comenity Bank Attn: Officer PO Box 182125 Columbus, OH 43218-2125

Comenity Capital Bank Attn: Officer PO Box 183043 Columbus, OH 43218-3043

Comenity Capital Bank Attn: Officer 2795 Cottonwoon Pkwy., Ate. 100 Salt Lake City, UT 84121

Conn's Applicance Attn: Officer PO Box 815867 Dallas, TX 75234

Credit Collections Attn: Officer 16 Distriubtor Drive, Ste. 1 Morgantown, WV 26501

Credit Management Attn: Officer 6080 Tennyson Pkwy, Ste. 100 Plano, TX 75024 Credit One Bank Attn: Officer PO Box 98873 Las Vegas, NV 89193

Duke Primary Care Attn: Officer 5213 South Alston Ave. Durham, NC 27713

Emikash Property Management, In Attn: Officer 9717 SW 32nd Lane Gainesville, FL 32608

Enhanced Recovery Corporation Attn: Officer 8014 Bayberry Rd. Jacksonville, FL 32256-7412

FedLoan Servicing Attn: Officer PO Box 69184 Harrisburg, PA 17106-9184

Fingerhut Credit Services Attn: Officer PO Box 1250 Saint Cloud, MN 56395-1250

First Premier Bank Attn: Officer PO Box 5524 Sioux Falls, SD 57117-5524

First Premier Bank Attn: Officer 601 S Minnesota Ave. Sioux Falls, SD 57104

Florida Credit Union Attn: Officer PO Box 5549 Gainesville, FL 32627 FMC\_Omaha Services Attn: Officer PO Box 542000 Omaha, NE 68154

IC Systems Attn: Officer PO Box 64378 Saint Paul, MN 55164

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Kohl's Attn: Officer PO Box 3043 Milwaukee, WI 53201-3043

Lester Hopkins 4416 SW 74th Terr Apt 2 Gainesville, FL 32608

LVNV Funding, LLC Attn: Officer PO Box 10497 Greenville, SC 29603

MJ Altman Companies Attn: Officer 205 S Magnolia Ave. Ocala, FL 34471

Moneylion of North Carolina, LLC Attn: Officer PO Box 1547 Sandy, UT 84091

N.C. Dept of Revenue Office Service Div. Bankruptcy Unit PO Box 1168 Raleigh, NC 27602-1168 National Recoveries, Inc. Attn: Officer PO Box 12066 Saint Paul, MN 55112

NPRTO South-East LLC Attn: Officer 256 West Data Drive Draper, UT 84020

Online Information Services Attn: Officer PO Box 1489 Winterville, NC 28590

Professional Recovery Attn: Officer 2700 Meridian Parkway, Ste. 200 Durham, NC 27713

Progressive Leasing Attn: Officer 256 West Data Drive Draper, UT 84020

Regional Acceptance Corporation Attn: Officer PO Box 830913 Birmingham, AL 35283

WakeMed Attn: Officer PO Box 29516 Raleigh, NC 27626